

FUCHS
EXHIBIT 14

From: "Vera Eastman"
Subject: Restricted gifts - removals and additions
Sent: Mon, 20 Mar 2017 18:03:41 -0400
[BA6E5B23-729C-4925-B3D5-6A0BFC1637A1\[54\].png](#)
[F6F2EA81-6D3B-4BC7-A1B5-8D8B7544C9A5\[54\].png](#)
[E6F3A4AA-081F-4E8C-88F0-CDDAB83C74C2\[54\].png](#)

From: Vera Eastman [vera@wonderwork.org]
Sent: Monday, March 20, 2017 2:04 PM
To: Hana Fuchs
CC: Janet Huang
Subject: Restricted gifts - removals and additions
Attachments: FY17 GL with moves highlighted in green.xls; FY17 to Dec 29 Restricted Gifts_fromDMI.xlsx

Hi Hana,

Attached are two files. The first is a copy of your general ledger with the gifts to move from 20/20/20 back into WonderWork. The gifts to move are highlighted in light green.

The second file is a list from DMI. The top gifts highlighted in gray should be moved into 20/20/20 from WonderWork. The batch numbers are in the far right.

Please let us know if you have any questions.

Best wishes,
Vera Eastman
Marketing and Development Manager
WonderWork

411 Fifth Avenue, Suite 702 **NEW ADDRESS!**
New York, NY 10016
tel: 212.729.1855 ext. 106
email: vera@wonderwork.org
skype: vera_wonderwork
www.WonderWork.org

Watch two blind sisters see their mom for the first time!

Almost 10,000,000 people have watched this heart-warming video so far. It was the #1 watched video on the National Geographic website for more than a year.

Miracle surgeries for children.
**wonder
work**



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DATABASE SELECTION FILE EXPORT

ID NUMBER	FIRST NAME	LAST NAME	ADDRESS 1 COMPANY	QUALIFYING AMOUNT	TRANS DATE	TRANS AMOUNT	TRAN CODE	TRAN TYPE	FUND CODE	IDMI Batch Number	UPDATE BATCH#	TRANSACTION MEMO
20327615				\$2,000.00	12/28/2016	\$2,000.00	XE16112901XXXUUUEM	CK	N		389W	
20304572				\$500.00	11/8/2016	\$500.00	XA1611XXWMXXXUUUWWM	CK	N		318W	
20662557				\$4,500.00	12/29/2016	\$4,500.00	XA16112206XXX002FF	CK	N		395W	From 12/15/16 letter - "[REDACTED] as a grant in support of your agency's blindness surgery program."
203002				\$1,000.00	9/28/2016	\$1,000.00	NR16090701XX4C5JRE	CK	N	286W		
20655049				\$10,000.00	10/14/2016	\$10,000.00	XA16062304XXX002FF	CK	N		298W	
113095				\$1,000.00	10/21/2016	\$1,000.00	XR1610XXUNXXXUUUMD	CK	N		305W	
113095				\$1,000.00	11/23/2016	\$1,000.00	XR1611XXUNXXXUUUMD	CK	N		325-328W	
113095				\$1,000.00	12/13/2016	\$1,000.00	XR16120206XX4B7JZZ	CC	N		Web Gift	
20662151				\$2,000.00	12/28/2016	\$2,000.00	XA1612XXWMXXXUUUWWM	CK	N		387	Microscope gift
20661328				\$1,000.00	12/15/2016	\$1,000.00	XA1612XXWMXXXUUUWWM	CK	N		353	Microscope gift
20661344				\$1,000.00	12/15/2016	\$1,000.00	XA1612XXWMXXXUUUWWM	CK	N		352	Microscope gift
20661351				\$1,000.00	12/15/2016	\$1,000.00	XA1612XXWMXXXUUUWWM	CK	N		352	Microscope gift
20661997				\$1,000.00	12/22/2016	\$1,000.00	XA1611XXWMXXXUUUWWM	CK	N		372	microscope gift for Bangladesh partner, [REDACTED]
20662003				\$1,000.00	12/22/2016	\$1,000.00	XA1611XXWMXXXUUUWWM	CK	N		372	Microscope gift
20660932				\$300.00	12/5/2016	\$300.00	XW1612XXWMXXXUUUWM	CC	N		769	Microscope gift for Bangladesh partner, [REDACTED]
20661336				\$200.00	12/15/2016	\$200.00	XA1612XXWMXXXUUUWWM	CK	N		351	Microscope gift
20386173				\$10,000.00	7/20/2016	\$10,000.00	XR1607XXWMXXXUUUWWM	CK	N	OL160720.001	0	

FUCHS
EXHIBIT 15

From: "DeLois Greenwood"
Subject: Reconciliation
Sent: Mon, 27 Mar 2017 14:51:45 -0400
[710B3CE8-30C4-4846-AC89-75AEBE90E413\[247\].png](#)
[40574A98-FF82-4EFD-A65B-6C88E59970C0\[247\].png](#)
[B41C7EB0-B1F0-47EC-B966-9A833BEEC99A\[247\].png](#)

From: DeLois Greenwood [delois@wonderwork.org]
Sent: Monday, March 27, 2017 10:52 AM
To: Janet Huang; Karen Lazarus; Vera Eastman; Hana Fuchs
Subject: Reconciliation
Attachments: FY16 donations 03.24.17 updated at 5pm.xlsx

Janet -it appears need to keep working on this —
Can you and Vera - pull back up for review asap -
Seems your reconciliation process has some issues — need to work out so Hana and your numbers agree.

DeLois Greenwood

Chief Program Officer
WonderWork
411 Fifth Avenue, Suite 702 **NEW ADDRESS!**
New York, NY 10016
tel: 212.729.1855 ext. 104
cell: 609 665 3466
email: delois@wonderwork.org
skype: delois_wonderwork
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Watch two blind sisters see their mom for the first time!

Almost 10,000,000 people have watched this heart-warming video so far. It was the #1 watched video on the National Geographic website for more than a year.



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EXHIBIT	<u>15</u>
WIT:	<u>Fuchs</u>
DATE:	<u>8-14-17</u>
DEBRA STEVENS, RPR, CRR	

TIME magazine named WonderWork "One Of 10 Ideas That Can Change The World."

WonderWork
Transaction Report
July 2015 - June 2016

Date	Transaction Type	Num	Name	Memo/Description	Account	Split	Amount	Balance
03/22/2016	Deposit		Donation		4000 Donations-WonderWork	1044 Banks:HSBC 1stStep 67-9	500.00	3,655,032.55
08/19/2015	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	362,687.22 find
09/16/2015	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1040 Banks:HSBC WW 89-6	25,000.00	586,275.87 find
10/06/2015	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1040 Banks:HSBC WW 89-6	35,000.00	746,094.35 find
11/03/2015	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	1,018,537.06
11/25/2015	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	1,262,288.24
11/25/2015	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	1,307,911.24
12/03/2015	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	1,388,988.81
12/09/2015	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	10,000.00	1,488,455.26
12/15/2015	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	1,567,191.08
12/15/2015	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	1,577,181.08
12/18/2015	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	20,000.00	1,688,492.73 find
12/24/2015	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	1,787,556.79
12/28/2015	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	1,848,768.66
12/29/2015	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	1,937,335.77
12/29/2015	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1040 Banks:HSBC WW 89-6	24,000.00	1,964,460.77 find
12/30/2015	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	2,030,779.22
01/04/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	10,000.00	2,219,615.23
01/06/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	10,000.00	2,294,077.96
01/06/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	2,299,077.96
01/08/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	2,452,921.01
01/12/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1040 Banks:HSBC WW 89-6	25,000.00	2,501,250.01 finf
01/15/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	10,000.00	2,563,391.92
02/29/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	2,836,918.90
03/03/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	2,885,294.82
03/29/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	50,000.00	3,193,497.17 find
03/30/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	20,000.00	3,247,637.67 find
04/04/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	10,000.00	3,302,441.16
04/07/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	3,377,509.58
04/12/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	3,394,019.58
04/20/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	3,534,680.30
05/06/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	3,733,012.42
06/15/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1041 Banks:HSBC 20/20/20 08-9	5,000.00	4,125,950.60
06/17/2016	Deposit		Donation		4010 Donations-WonderWork:Blindness (N)	1040 Banks:HSBC WW 89-6	5,000.00	4,144,776.80
12/01/2015	Deposit		Donation		4020 Donations-WonderWork:Burns (B)	1042 Banks:HSBC BurnRescue 5-12	10,000.00	203,341.88

Date	Transaction Type	Num	Name	Memo/Description	Account	Split	Amount	Balance
04/20/2016	Deposit		Donation		4020 Donations-WonderWork:Burns (B)	1042 Banks:HSBC BurnRescue 5-12	5,000.00	447,424.30
06/24/2016	Deposit		Donation		4020 Donations-WonderWork:Burns (B)	1040 Banks:HSBC WW 89-6	5,000.00	525,804.83
11/23/2015	Deposit		Donation		4030 Donations-WonderWork:Clubfoot (C)	1040 Banks:HSBC WW 89-6	5,000.00	200,932.67
12/04/2015	Deposit		Donation		4030 Donations-WonderWork:Clubfoot (C)	1044 Banks:HSBC 1stStep 67-9	5,000.00	231,867.67
02/23/2016	Deposit		Donation		4030 Donations-WonderWork:Clubfoot (C)	1044 Banks:HSBC 1stStep 67-9	10,000.00	444,600.22
03/28/2016	Deposit		Donation		4030 Donations-WonderWork:Clubfoot (C)	1044 Banks:HSBC 1stStep 67-9	10,000.00	511,669.67
03/29/2016	Deposit		Donation		4030 Donations-WonderWork:Clubfoot (C)	1044 Banks:HSBC 1stStep 67-9	10,000.00	522,223.92
04/29/2016	Deposit		Donation		4030 Donations-WonderWork:Clubfoot (C)	1040 Banks:HSBC WW 89-6	10,000.00	611,489.25 moved back to WW

Thursday, Mar 23, 2017 02:05:05 PM GMT-7 - Accrual Basis

FUCHS
EXHIBIT 16

CARTER LEDYARD & MILBURN LLP
Counselors at Law

Pamela A. Mann
Partner
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2 Wall Street
New York, NY 10005-2072
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Fax (212) 732-3232

570 Lexington Avenue
New York, NY 10022-6856
(212) 371-2720

April 25, 2017

BY EMAIL AND MAIL

Mr. William K. Harrington
Attn: Brian S. Masumoto
Assistant United States Trustee, Region 2
Office of The United States Trustee
U.S. Federal Office Building
201 Varick Street, Suite 1006
New York, NY 10014

Benjamin Mintz
Arnold & Porter Kaye Scholer LLP
250 West 55th Street
New York, NY 10019

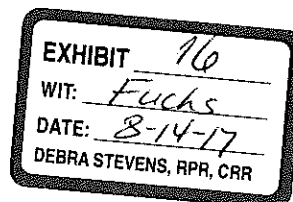
Eric T. Schneiderman
Attorney General of the State of New York
Attn: Carl L. Distefano (CD-0588)
Assistant Attorney General
Charities Bureau
120 Broadway, 3rd Floor
New York, NY 10271

Re: In re Wonderwork, Inc. (Case No. 16-13607 (MKV))

Dear Mr. Harrington, Mr. Mintz and Mr. Schneiderman:

We are counsel to WonderWork, Inc. (the "Debtor"). Pursuant to ¶ 5 of page 6 of the Order Directing the Appointment of an Examiner and Establishing Temporary Budgetary Controls, dated April 21, 2017, enclosed please find "an unaudited schedule of [the Debtor's] restricted and unrestricted funds, including a breakdown as to the nature of any alleged restrictions," along with explanatory notes.

7942349.4



WON-EX 0001

Please note that the Debtor has moved to retain BDO USA, LLC to, among other things, conduct an audit of the Debtor's financials for F/Y/E June 30, 2016. Because that audit is not yet complete, the figures that follow are unaudited.

Very sincerely,



Pamela A. Mann

Unaudited Schedule

Classification of Funds (note 1)	Totals at 6/30/16	Totals at 12/28/16	Totals at 3/31/17
Surgery Programs or Other Special Projects	\$1,850,645	\$3,026,162	\$3,336,888 (note 4)
Blindness	2,346,733	3,038,754	2,547,144
Burns	1,842,173	2,054,864	1,980,679
Clubfoot	2,405,620	2,754,803	2,865,430
Medical Records Database	389,000	374,000	349,000
Total Restricted	\$8,834,171	\$11,248,583	\$11,079,141
Unrestricted (note 2)	\$8,224,514	\$7,911,759	\$7,542,285
Unclassified (note 3)	\$49,775	\$29,170	N/A
Total Restricted, Unrestricted and Unclassified	<u>\$17,108,460</u>	<u>\$19,189,512</u>	<u>\$18,621,426</u>

Notes

- (1) "Surgery Programs or Other Special Projects" are donations made to WonderWork (as opposed to WonderWork's trade names 20/20/20, BurnRescue or FirstStep), restricted to one or more surgery programs or to other special projects. "Blindness," "Burns" and "Clubfoot" are donations made to 20/20/20, BurnRescue or First Step, restricted to blindness, burns and clubfoot programs, respectively. "Medical Records Database" refers to a grant to WonderWork, restricted to a medical records database project.
- (2) Unrestricted assets are assets that are not subject to donor-imposed restriction. This figure represents the unrestricted cash on hand at each time period noted. It does not include contributions receivable (pledges), prepaid expenses and other assets, property and equipment, or outstanding liabilities.
- (3) "Unclassified" represents the sum of donations of less than \$500 at each time period noted. For these relatively small donations, backup materials such as checks or donor letters have not been reviewed; in many cases, the cost of doing so would exceed the value of the donation. Debtor intends to treat these contributions as restricted to ensure compliance with applicable law.
- (4) This figure includes approximately \$362,000 comprised of all donations of any amount received from and including 12/29/16 to and including 3/31/17. Pending completion of the review process, some of these donations may be reclassified as unrestricted.

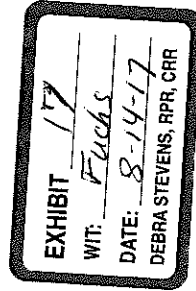
FUCHS
EXHIBIT 17

P.O. Box 966669, Washington, DC 20090-6669

20/20/20
RESTORING THE EYESIGHT OF
20 MILLION BLIND
CHILDREN AND ADULTS

Brian Mullaney
Co-Founder

One donation from you can restore
the eyesight of a blind child.
(And we'll never ask you for another.)



Send us a donation and we'll never ask for another!

Return Address

Attention: Brian

20/20/20
P.O. Box 96669
Washington, DC 20090-6669

20/20/20

20/20/20
P.O. Box 96669
Washington, DC 20090-6669

IWCG Job No: 2013080
Component: RAE

Project: WW 20/20/20 April Acquisition
Size: #9 Stock: white Ink: 1/1 TMS 329 Green

Date: 03/15/13 Stage: FINAL

20/20/20 is a WonderWork charity program. Your gift is very much appreciated and fully deductible as a charitable contribution. A copy of our latest financial report may be obtained by writing to WonderWork, Inc., 420 Fifth Avenue, 27th Floor, New York, NY 10018, 212-390-1544. If you are a resident of one of these states, you may obtain financial information directly from the state agency: FLORIDA – A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE, 1-202-435-7352 (800-HLP-FLA) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE. FLORIDA REGISTRATION: CH136539. GEORGIA – A full and fair description of our programs and our financial statement summary is available upon request at the office and phone number indicated above. MARYLAND – For the cost of copies and postage, Office of the Secretary of State, State House, Annapolis, MD 21401. MISSISSIPPI – The official registration and financial information may be obtained from the Mississippi Secretary of State's office by calling 1-888-236-5167. Registration by the Secretary of State does not imply endorsement. NEW JERSEY – INFORMATION FILED WITH THE ATTORNEY GENERAL CONCERNING THIS CHARITABLE PURPOSE MAY BE OBTAINED FROM THE ATTORNEY GENERAL OF THE STATE OF NEW JERSEY BY CALLING (973) 594-6245 AND IS AVAILABLE ON THE INTERNET AT <http://www.state.nj.us/treasury/char/charinfo.htm>. REGISTRATION WITH THE ATTORNEY GENERAL DOES NOT IMPLY ENDORSEMENT. NEW YORK – Office of the Attorney General, Department of Law, Charities Bureau, 120 Broadway, New York, NY 10271. NORTH CAROLINA – FINANCIAL INFORMATION ABOUT THIS ORGANIZATION AND A COPY OF ITS LICENSE ARE AVAILABLE FROM THE STATE SOLICITATION LICENSING BRANCH AT 1-888-882-4689. THE LICENSE IS NOT AN ENDORSEMENT BY THE STATE. PENNSYLVANIA – The official registration and financial information of WonderWork may be obtained from the Pennsylvania Department of State by calling toll-free, within Pennsylvania, 1-800-732-0909. Registration does not imply endorsement. VIRGINIA – Virginia State Office of Consumer Affairs, Department of Agricultural and Consumer Services, PO Box 1193, Richmond, VA 23218. WASHINGTON – Charities Division, Office of the Secretary of State, State of Washington, Olympia, WA 98504-0422, 1-509-332-4463. REGISTRATION – Resident's may obtain a summary of the registration and financial documents from the Secretary of State, State Capitol, Charleston, WV 25305. Registration with any of these state agencies does not imply endorsement, approval or recommendation by any state.

Information About Cloudy Lenses and Your Vision

What is a cloudy lens?

A cloudy lens affects vision and can cause blindness. Most cloudy lens problems are related to aging and very common in older people. By age 80, more than half of all Americans either have experienced a cloudy lens, or have had surgery to correct cloudy lens. A cloudy lens can occur in either one or both eyes. It cannot spread from one eye to the other. A congenital cloudy lens is present at birth. The lens of the eye is normally clear. It focuses light that comes into the eye onto the retina. In most patients, no cause can be found.

What is the lens?

The lens is a clear part of the eye that helps to focus light, or an image, on the retina. The retina is the light-sensitive tissue at the back of the eye. In a normal eye, light passes through the transparent lens to the retina. Once it reaches the retina, light is changed into nerve signals that are sent to the brain. The lens must be clear for the retina to receive a sharp image. If the lens is cloudy from a cloudy lens, the image you see will be blurred.

What types of cloudy lenses are there?

Although most cloudy lens problems are related to aging, there are other types: **Secondary** — A cloudy lens can form after surgery from other eye problems, such as glaucoma. A cloudy lens can also develop in people who have other health problems, such as diabetes. A cloudy lens can sometimes be linked to steroid use. **Traumatic** — A cloudy lens can develop after an eye injury, sometimes years later. **Congenital** — Some babies are born with a cloudy lens or develop

them in childhood, often in both eyes. These may not affect vision. If they do, the lenses may need to be removed. **Radiation** — A cloudy lens can develop after exposure to some types of radiation.

What are the causes of a cloudy lens?

The lens of the eye is normally clear. It acts like the lens on a camera, focusing light as it passes to the back of the eye. Until a person is around age 45, the shape of the lens is able to change. This allows the lens to focus on an object, whether it is close or far away. As we age, proteins in the lens begin to break down and the lens becomes cloudy. What the eye sees may appear blurry. This condition is known as a cloudy lens. Factors that may speed up cloudy lens formation are: Diabetes; Smoking; Eye inflammation; Eye injury; Family history of cloudy lens; Long-term use of corticosteroids (taken by mouth) or certain other medications; Radiation exposure; Surgery for another eye problem; Too much exposure to ultra-violet light (sunlight). In many cases, the cause of a cloudy lens is unknown.

How can a cloudy lens affect my vision?

Age-related cloudy lens can affect your vision in two ways: Clumps of protein reduce the sharpness of the image reaching the retina. The lens consists mostly of water and protein. When the protein clumps up, it clouds the lens and reduces the light that reaches the retina. The clouding may become severe enough to cause blurred vision. Most age-related cloudy lens develops from protein clumpings. When a cloudy lens is small, the cloudiness affects only a small part of the lens. You may not notice any changes in your vision. Cloudy lens tend to "grow" slowly, so vision gets worse gradually. Over time, the cloudy area in the lens may get larger, and the cloudy lens may increase in size. Seeing may become more difficult and your vision may get duller or blurrier. The clear lens slowly changes to a yellowish-brownish color, adding a brownish tint to vision. As the clear lens slowly colors with age, your vision gradually may acquire a brownish shade. At first, the amount of tinting may be small and may not cause a vision problem. Over time, increased tinting may make it more difficult to read and perform other routine activities. This gradual change in the amount of tinting does not affect the sharpness of the image transmitted to the retina. If you have advanced lens discoloration, you may not be able to identify blues and purples. You may be wearing what you believe to be a pair of black socks, only to find out from friends that you are wearing purple socks.

When are you most likely to have a cloudy lens?

The term "age-related" is a little misleading. You do not have to be a senior citizen to get this type of cloudy lens. In fact, people can have an age-related cloudy lens in their 40s and 50s. But during middle age, most cloudy lens are small and do not affect vision. It is after age 60 that most cloudy lenses start vision.

What are the symptoms of a cloudy lens?

Blurry vision; Colors that seem faded; Glare; Headlights, lamps, or sunlight may appear too bright; A halo may appear around lights; double vision; not being able to see well at night; frequent prescription changes in your eye wear. These symptoms also can be a sign of other eye problems. If you have any of these symptoms, check with your eye care professional. Cloudy lens usually develops slowly. New glasses, brighter lighting, anti-glare sunglasses or magnifying lenses can help at first. Surgery is also an option. It involves removing the cloudy lens and replacing it with an artificial lens. Congenital cloudy lens usually looks different than other forms of cloudy lens. Symptoms include: Infant doesn't seem to be able to see (if cloudy lens are in both eyes); Gray or white cloudiness of the pupil (which is normally black); "Red eye" glow of the pupil is missing in photos, or is different between the two eyes; Unusual rapid eye movements (nystagmus).

How is a cloudy lens detected?

A cloudy lens is detected through a comprehensive eye exam that includes: **Visual acuity test** — This eye chart test measures how well you see at various distances. **Dilated eye exam** — Drops are placed in your eyes to widen, or dilate, the pupils. Your eye care professional uses a special magnifying lens to examine your retina and optic nerve for signs of damage and other eye problems. After the exam, your close-up vision may remain blurred for several hours. **Tonometry** — An instrument measures the pressure inside the eye. Numbing drops may be applied to your eye for this test.

How is a cloudy lens treated?

The symptoms of early cloudy lenses may be improved with new eyeglasses, brighter lighting, anti-glare sunglasses, or magnifying lenses. If these measures do not help, surgery is the only effective treatment. Surgery involves removing the cloudy lens and replacing it

with an artificial lens. A cloudy lens needs to be removed only when vision loss interferes with your everyday activities, such as driving, reading, or watching TV. You and your eye care professional can make this decision together. Once you understand the benefits and risks of surgery, you can make an informed decision about whether cloudy lens surgery is right for you. In most cases, delaying cloudy lens surgery will not cause long-term damage to your eye or make the surgery more difficult. You do not have to rush into surgery. Sometimes a cloudy lens should be removed even if it does not cause problems with your vision. For example, a cloudy lens should be removed if it prevents examination or treatment of another eye problem, such as age-related macular degeneration or diabetic retinopathy. If your eye care professional finds a cloudy lens, you may not need cloudy lens surgery for several years. In fact, you might never need cloudy lens surgery. By having your vision tested regularly, you and your eye care professional can discuss if and when you might need treatment. If you choose surgery, your eye care professional may refer you to a specialist to remove the cloudy lens. If you have cloudy lens in both eyes that require surgery, the surgery will be performed on each eye at separate times, usually four to eight weeks apart. Many people who need cloudy lens surgery also have other eye conditions, such as age-related macular degeneration or glaucoma. If you have other eye conditions in addition to cloudy lens, talk with your doctor. Learn about the risks, benefits, alternatives, and expected results of cloudy lens surgery.

How is a congenital cloudy lens treated?

If congenital cloudy lenses are mild and do not affect vision, they may not need to be treated, especially if they are in both eyes. Moderate to severe cloudy lenses that affect vision, or a cloudy lens that is in only one eye, will need to be treated with cloudy lens removal surgery. In most (noncongenital) cloudy lens surgeries, an artificial intraocular lens (IOL) is inserted into the eye. The use of IOLs in infants is controversial. Without an IOL, the infant will need to wear a contact lens. Patching to force the child to use the weaker eye is often needed to prevent amblyopia.

Is cloudy lens surgery effective?

Cloudy lens removal is one of the most common operations performed in the United States. It also is one of the safest and most effective types

of surgery. In about 90 percent of cases, people who have cloudy lens surgery have better vision afterward.

What are the risks of cloudy lens surgery?

Early diagnosis and treatment are key to preventing permanent vision problems. As with any surgery, cloudy lens surgery poses risks, such as infection and bleeding. Before cloudy lens surgery, your doctor may ask you to temporarily stop taking certain medications that increase the risk of bleeding during surgery. After surgery, you must keep your eye clean, wash your hands before touching your eye, and use the prescribed medications to help minimize the risk of infection. Serious infection can result in loss of vision. Cloudy lens surgery slightly increases your risk of retinal detachment. Other eye disorders, such as high myopia (nearsightedness), can further increase your risk of retinal detachment after cloudy lens surgery. One sign of a retinal detachment is a sudden increase in flashes or floaters. Floaters are little "caywels" or specks that seem to float about in your field of vision. If you notice a sudden increase in floaters or flashes, see an eye care professional immediately. A retinal detachment is a medical emergency. If necessary, go to an emergency service or hospital. Your eye must be examined by an eye surgeon as soon as possible. A retinal detachment causes no pain. Early treatment for retinal detachment often can prevent permanent loss of vision. The sooner you get treatment, the more likely you will regain good vision. Even if you are treated promptly, some vision may be lost. Talk to your eye care professional about these risks. Make sure cloudy lens surgery is right for you.

When to contact a medical professional

Call for an appointment with your health care provider if you have: decreased night vision, problems with glare, or vision loss.

How can I prevent cloudy lenses?

The best prevention involves controlling diseases that increase the risk of a cloudy lens, and avoiding exposure to factors known to promote cloudy lens formation. Wearing sunglasses and a hat with a brim when you are outside during the day can reduce the amount of ultraviolet (UV) light your eyes are exposed to. Some sunglasses do not filter out the harmful UV. An optician should be able to tell you which sunglasses filter out the most UV. For patients who smoke cigarettes,

quitting will decrease the risk of cloudy lenses. Research also believe good nutrition can help reduce the risk of age-related cloudy lenses. They recommend eating green leafy vegetables, fruit, and other foods with antioxidants. If you are age 60 or older, you should have a comprehensive dilated eye exam at least once every two years. In addition to cloudy lens, your eye care professional can check for signs of age-related macular degeneration, glaucoma, and other vision disorders. Early treatment for many eye diseases may save your sight.

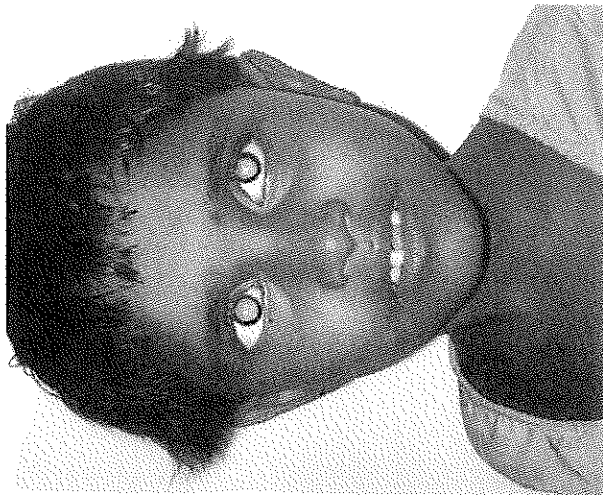
Summary

A cloudy lens is a clouding of the eye's lens and is the leading cause of blindness worldwide, and the leading cause of vision loss in the United States. Cloudy lens can occur at any age due to a variety of causes, and can be present at birth. Although treatment for the removal of a cloudy lens is widely available, access barriers such as insurance coverage, treatment costs, patient choice, or lack of awareness prevent many people from receiving the proper treatment. An estimated 20.5 million (17.2%) Americans 40 years and older have a cloudy lens in one or both eyes, and 6.1 million (5.1%) have had their lens removed operatively. The total number of people who have cloudy lenses is estimated to increase to 30.1 million by 2020.

Information was derived from the U.S. Government National Institutes of Health, the National Eye Institute and the Centers for Disease Control and Prevention.

20/20/20
RESTORING THE EYESIGHT OF
20 MILLION BLIND
CHILDREN AND ADULTS

In developing countries, blindness is 500% more prevalent than in the U.S.



Millions of children and adults become blind every year and it can happen at any age.

Babies are born completely blind in both eyes.

Children who have perfect eyesight suddenly go blind in one eye or both.

Teenagers suffer injuries that cause them to go completely blind.

Parents become blind and lose their jobs, their income and their families.

Grandparents lose their eyesight and become a huge burden to their families.

All of them could have their eyesight restored — if someone helps them.

Millions who are waiting for surgery to restore their eyesight will never receive it unless someone helps them.



You can be that someone.

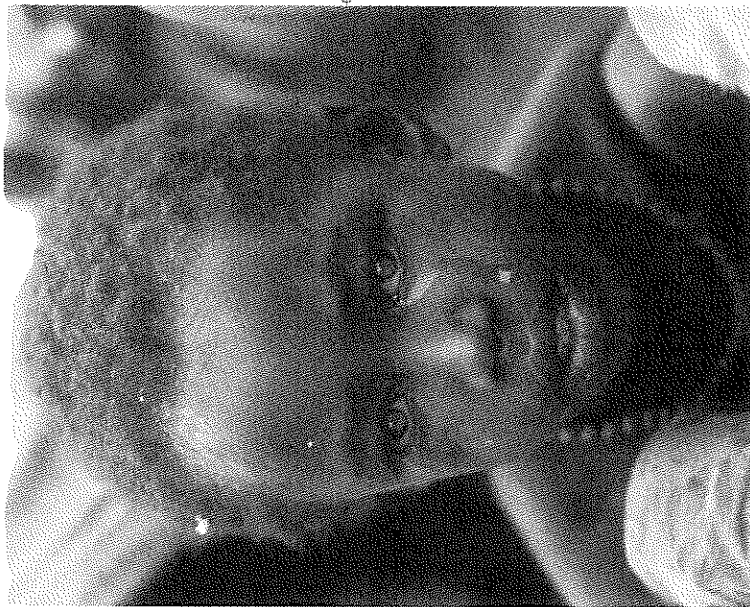
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RESTORING THE EYESIGHT OF
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All donations are tax deductible in accordance with IRS regulations. © 2013 20/20/20

One million blind children could have their eyesight restored through a \$300 surgery.



20/20/20
RESTORING THE EYESIGHT OF
20 MILLION BLIND
CHILDREN AND ADULTS

They've invented a surgery that can cure blindness in 15 minutes.

It sounds unbelievable but it's true. Half of all the blind children and adults in the world — that's 20 million people — could have their eyesight restored through a miracle surgery that takes 15 minutes and costs \$300. It is a modern-day medical miracle. The bad news is that even at \$300, most blind children and adults in developing countries could never afford this surgery.



So millions of blind children and adults — who are often referred to as the "needlessly blind" — will remain blind.

Forever.

Unless someone helps them.

That's why we started 20/20/20.

To restore 20/20 vision to 20 million blind children and adults!

To give them back not just their eyesight — but their future too.

But we can't do it without your help.

Please help us restore the vision of a child or adult who is blind.

20/20/20 is different than other charity programs.

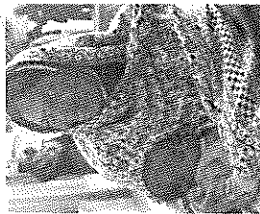
**We're focused on a single problem:
helping the blind see.**

Unlike most charities that try to solve many different problems, we're focused exclusively on just one. This helps us be more productive and cost-efficient. And it makes it easy for us to measure our progress and effectiveness. Our name says it all — our mission is to help restore 20/20 vision for 20 million blind children and adults.



**We deliver results you can see
and benefits that last a lifetime.**

Unlike charities that are searching for a cure or that do things that you can't really see or appreciate, what we do is crystal clear. We provide miracle surgeries that in a matter of minutes can restore the eyesight of children and adults who are blind. Permanently.



**We give donors the opportunity
to save a child's life.**

Literally.

The World Health Organization reports that in developing countries, 60% of children die within 1-2 years of going blind.

Our miracle surgeries not only can give these children their eyesight back — but their future too.



**We give donors the maximum impact
for every donation.**

Every donor wants to know that their donation, whatever amount, actually makes a difference. What could be more impactful than restoring the eyesight of a child who is completely blind? And saving them from a lifetime of suffering, pain and heartache?



20/20/20 is managed like a business.

20/20/20 has a very experienced management team that takes great pride in the fact that it is held accountable for achieving specific goals and very ambitious results. We measure and monitor everything we do. Every program, every direct mail campaign, every dollar that we spend.

**Extremely low overhead.
Sky-high productivity.**

Donors don't like charities that spend a lot on overhead and administration.

Neither do we.

We have a tiny staff working in a half-price sublet office that came with free furniture. All of our technology — email, servers, networks — is in the "cloud" which saves millions of dollars.



**20/20/20 is a WonderWork
charity program.**

This means we share office space, personnel, computers, etc. with other charity programs in order to dramatically reduce our overhead, administration and fundraising costs.

Yes, I want to give the blind a chance to see...

- ☐ \$300 to provide a full surgery
☐ \$150 to provide half a surgery
☐ \$75 for anesthesia
☐ \$_____ Any amount will help

2 \$300 donation
makes 100% funding goal!

- ☐ Please send me updates about 20/20/20.
☐ I'd like to receive limited communications.
☐ Please do not ask me for another donation.

(Please allow 8 weeks to be removed from our mailing list.
Thanks for your patience as we process your request.)

- ☐ If you prefer to charge your gift to a credit card, please check here and see other side.
Please make check payable to 20/20/20.

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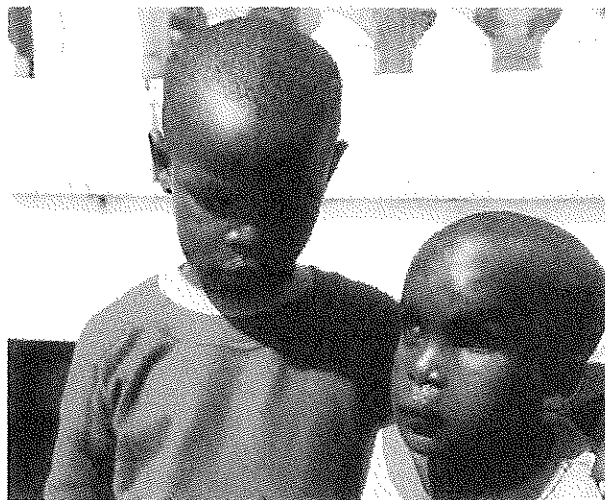
20/20/20
RESTORING THE EYESIGHT OF
20 MILLION BLIND
CHILDREN AND ADULTS

One donation from you
can restore the eyesight
of a blind child or adult.
(And we'll never ask
for another.)

Dear Friend,

Just think if you were born into a poor family, living in a mud hut, in one of the poorest countries in the world.

And you are completely blind. In both eyes. Since birth.



I recently met a 5-year-old boy who had been born into this horrific situation.

We met at a small hospital in rural Ethiopia where we were helping hundreds of children who needed free cleft surgery. As the co-founder and former CEO of Smile Train, my team and I helped 700,000 children undergo surgery they would otherwise never have received.

But there was nothing I could do to help this 5-year-old boy.

That broke my heart.

I watched him being led around by his friend and his future was as bleak as the look on his face. When I returned to the U.S., these pictures that I took really haunted me. So I did some research and what I learned was shocking.

There are 40 million blind children and adults in the world. Half of them could see tomorrow if they received a simple surgery that costs just \$300.

Yes, I know this sounds like it cannot possibly be true. But it is.

20 million children and adults are blind because they are too poor to afford a simple 15-minute surgery. So they remain blind. For life. They're called the "needlessly blind." What a wretched name.

My immediate reaction was, that's not a surgery -- that is a miracle!

PR-11-000001

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WON-EX 9029

Visit our web site at 20x20x20.org to make a secure donation online.
Enclosed is my check payable to 20/20/20. If you prefer, we accept:
() MasterCard () VISA () American Express () Discover

Card # CVV# Exp. Date ____/____/____

Signature

20/20/20 sometimes allows other worthy organizations to mail to our donors. If you do not wish to receive these mailings, or if you would like to change the frequency of mailings from us, let us know. We are happy to respect your wishes. 20/20/20 is a WonderWork charity program. WonderWork is a 501 (c) (3) nonprofit charitable organization recognized by the IRS. All donations are tax deductible in accordance with the law.

20/20/20
RESTORING THE EYESIGHT OF
20 MILLION BLIND
CHILDREN AND ADULTS
P.O. Box 96669
Washington, DC 20090-6669

A 15-minute surgery that can restore the eyesight of someone who is completely blind is a modern-day, medical miracle.

So why haven't all of these blind children and adults been helped already?

This answer is also unbelievable. Today, in developing countries, 20 million children and adults remain blind *solely because they are too poor to afford the \$300 miracle surgery that could restore their eyesight.*

So they will remain blind. Forever.

Unless someone helps them.

You can be that someone.

That's why we created 20/20/20.

To restore the eyesight of 20 million children and adults.

To give each one of them back not just their vision — but their future.

And a 2nd chance at life that they never thought they'd get.

But we can't do it without your help.

We're a new charity program and we receive no money from the government or big foundations and corporations.

Every life-changing surgery we provide is paid for with donations from generous individuals like you.

YOU can make a miracle happen for a blind child or a blind adult.

YOU can save someone from a lifetime of blindness.

Will you please help us?

100% of your donation will go towards programs — 0% goes to overhead or fundraising.

The impact of even a modest donation can be enormous.

Imagine what you would pay to save your child from a lifetime of blindness.

Imagine what this surgery means to these children and their parents. It means the world — and it costs so little.

To thank you for helping us, I will send you a photo of a child you helped.

I promise those photos will open your eyes too.

Thanks for helping us help these kids.

Brian Mullaney
Co-Founder

P.S. Would you honor us by becoming a Founding Donor? All it takes is a \$300 donation. I'll send you a certificate of appreciation and when we're helping millions of blind children and adults a year, you'll be proud you helped us get started.

WON-EX 9030

BURN RESCUE

Life-changing surgeries for
severely burned children.

Brian Mullaney
Co-Founder



Send us a donation to help a
severely burned child and we'll
never ask you for another one!

P.O. Box 96034, Washington, DC 20090-6034

BurnRescue
PO Box 96054
Washington, DC 20090-6054

2020-2021

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Component: RAE

Project: WW BurnRescue April Acquisition
Size: #9 **Stock:** white **Ink:** 1/1; PMS 212/

Date: 03/15/13 Stage: FINAL

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Information About Burns and How to Prevent and Treat Them

BURN RESCUE

U.S. Senator, Mr. John Chafee

What is a burn?
A burn is damage to your body's tissues caused by heat, chemicals, electricity, sunlight or radiation. Scalds from hot liquids and steam, bubbling fires and flammable liquids and gases are the most common causes of burns.

What are the different types of burns?

There are three levels of buses:

1. First-degree (superficial) burns affect only the outer layer of skin. They cause pain, redness and swelling.
2. Second-degree (partial thickness) burns affect both the outer and underlying layer of skin. They cause pain, redness, swelling and blistering.
3. Third-degree (full thickness) burns extend into deeper tissues. They cause white or blackened, charred skin that may be numb.

Barite can cause swelling, itching and, in serious cases, shock and even death. They also can be poisonous because they damage your skin's protective barrier. Antibiotic creams can prevent or treat infections. After a third-degree burn, you need skin or synthetic grafts to cover exposed tissue and encourage new skin to grow. First and second degree burns usually heal without grafts.

What are the most common causes of burns?

Burns can be caused by dry heat (like fire), wet heat (such as steam or hot liquids), radiation, friction, heated objects, the sun, electricity, or chemicals.

Thermal burns are the most common type. Thermal burns occur when hot liquids, scalding liquids, steam or flames come in direct contact with your skin. They are frequently the result of fires, automobile accidents, playing with matches, improperly stored gasoline, space heaters, and electrical malfunctions.

Pain to your uterus can be caused by ink, any smoke, steam, substances that are not safe for your fetus.

What are the symptoms of burns?

These are the symptoms for the following lesions: fissures, pain, peeling skin, and skin, shock, swelling, white or charred es-

What are issues to consider before treating burns?

Before giving first aid, evaluate how extensively the person is and try to determine the depth of the most serious part of the burn. Then treat the rest to burn accordingly. If a caustic liquid is a scalding burn, treat it as a scalding burn.

By giving immediate first aid before professional medical help arrives, you can help lessen the severity of the burn. Prompt medical attention to serious burns can help prevent scarring, disfigurement, and deformity. Burns on the face, hands, feet, and groin should be treated by a physician.

Children under age 4 and adults over age 50 have a higher chance of complications and death from severe flu.

in case of a fire, and the others that are at risk for carbon

monoxide poisoning. Anyone with symptoms of headache, numbness, weakness, or chest pain should be tested.

How can burns be treated?

Abstract

1. If the skin is unbroken, fill cool water over the area of the burn or soak it in a cool water bath (not ice water). Keep the area submerged for at least 3 minutes. A clean, gold, wet towel will also help reduce pain.
2. Gently pat down the burn.

2.2. Calm and confusion the version.

3. After finishing or soaking, cover the garment with a dry, sterile bandage or clean dressing.

4. Probed the burn from proximal to distal.
5. Offer the patient morphine or acetaminophen can help relieve pain and soothing. Do NOT give diazepam until 12 hours after the burn has cooled, measuring pain also can help.
6. Minor burns (1st usually heal without further treatment) however, if a second degree burn covers an area more than 2 to 3 inches in diameter, or if it is located on the hands, feet, face, genital, buttocks, or a major joint, treat the burn as a major burn.
7. Make sure the person is up to date on tetanus immunization.

First Aid to: Neph or Burns

1. If someone is on fire, tell the person to stop, drop, and roll (ell). Wrap the person in thick material to smother the flames (a wool or cotton coat, rug, or blanket). Douse the person with water.
2. Call 911.

3. Make sure that the person is no longer in contact with smoldering materials. However, do NOT remove burned clothing that is stuck to the skin.
4. If the person is breathing, if breathing has stopped, or if the person's airways are blocked, after the attacks, if necessary, begin rescue breathing and CPR.

5. **Expose the burn area with a dry sterile bandage (if available)** or clean cloth. A sheet will do if the burned area is large. Do not apply any ointments. Avoid broken burn blisters.

6. If fingers or toes have been burned, separate them with dry, sterile, non-adhesive dressings.

7. Elevate the lumpy part that is burned above the level of the heart. Protect the burn area from pressure and friction.

8. Kase steps to present side-2, lay the person flat, straighten the feet about 12 inches, and cover the person with a cool or lighted, fluorescent, do NOT place the person in its sickle position if a head, neck, back, or leg injury is suspected or if it makes the person uncomfortable.

3. Continue to monitor the person's vital signs until medical help arrives. This means pulse, rate of breathing, and blood pressure.

When should I contact a medical professional?

1111

- The burn is extensive (the size of your palm or larger).
- The burn is severe (third degree).
- You aren't sure how serious it is.
- The burn is caused by chemicals or electricity.
- The person shows signs of shock.
- The person inhaled smoke.
- Physical abuse is the known or suspected cause of the burn.

- if there are other symptoms associated with the burn:

Call a doctor if your pain is still present after 48 hours.

Call immediately if signs of infection develop. These signs include increased pain, redness, swelling, drainage or pus from the drain, swollen lymph nodes, and streaks spreading from the drain, or fever.

Also call immediately if there are signs of dehydration, thirst, dry skin, dizziness, light-headedness, or decreased attention. Confusion, fatigue, and anyone with a weakened immune system (for example, HIV) should seek medical care right away.

Where are people treated for burns?

A new field of burn patients in the United States are treated in specialized burn centers, and most hospitals have training

burns that rate excessively for patients with traumatic injuries that have associated burns.

What is a skin graft?

A skin graft is a patch of skin that is removed by surgery from one area of the body and transplanted, or attached, to another area. It is a procedure that is recommended for a patient with burns depending on the severity and location of the burns.

Your surgery will probably be done while you are under general anesthesia. You will be unconscious and will not feel pain.

Healthy skin is taken from a place on your body called the donor site. Most people who are having a skin graft have a split-thickness skin graft. This means that the graft is taken from the dermis and epidermis layers of the skin, not the epidermis (the outer layer).

The donor site can be any area of the body. Most times, it is an area that is not as visible, such as the buttock or inner thigh. The graft is cut with a special tool called a dermatome. It is then placed on the burn area where it is being treated. It is held in place either by gentle pressure from a wet poultice dressing that covers it, or by staples or a few small sutures. The donor site area is covered with a sterile dressing for 3 to 5 days.

People with deeper tissue loss may need a full-thickness skin graft. This requires an extra incision of skin from the donor site, not just the top two layers.

A full-thickness skin graft is a more complicated procedure. The flap of skin from the donor site makes the incisions and blood supply. It is transplanted to the area of the graft. The graft is held in place with sutures. The grafts include the outer skin, back, or abdominal wall.

What are things I should NOT DO when treating burns?

- Do NOT apply antibiotic ointment, butter, oil, medication, cream, or apply an ointment that needs to be a severe burn.

- Do NOT breathe, blow, or cough on the burn.
- Do NOT disturb blisters or dead skin.
- Do NOT remove anything that is stuck to the skin.
- Do NOT give the person anything by mouth, if there is a severe burn.
- Do NOT immerse a severe burn in cold water. It is a cause shock.
- Do NOT place a pillow under the person's head if there is an airway burn. This can block the airway.

How can I prevent burns?

- The following list can help prevent burns:
 - Test smoke alarms in your home. Check and change batteries regularly.
 - Keep emergency phone numbers and other pertinent information posted close to your telephone.
 - Wear a floor mat and find two exits from each room.
 - Windows can serve as emergency exits.
 - Practice getting out of the house through the various exits.
 - Designate a meeting place at a safe distance outside the home.
 - Respond to every alarm as if were a real fire.
 - Call the fire department after escape, but then your address and do not hang up until you are told to do so. Let them know if anyone is trapped inside.
 - Never go back into a burning building to look for missing people, pets, property, etc. Wait for firefighters.
 - Teach children about fire safety and the hazards of matches and fireworks.
 - Keep children from climbing on top of the stove or grabbing hot items like irons and oven toasters.
 - Turn pot handles toward the back of the stove so that children cannot grab them and they cannot be

- are readily extinguished.
- Never leave fires unattended on a stove.
- Keep cooking areas free of flammable objects (such as paper bags and towels).
- Avoid smoking clothes, hair, hair, shoes, bedding, sleeves, when cooking.
- Never smoke in bed or large burning appliances unattended.
- Place fire extinguishers in key locations at home, work and school.
- Practice fire drills with family members.
- Set temperatures of water heater at 120 degrees or less to prevent liquid burns from the faucet.
- Keep a, needles, and needles out of reach of children.
- Store lawn mowers, tools, and other equipment in a locked cabinet.
- Do not smoke smoking ashes in a trash can, and keep ashtrays away from upholstered furniture and curtains.
- Never leave portable space heaters near flammable materials (such as, drapes).

What are other things I can do around my house to prevent fires?

More than one-third of Americans use fireplaces. Wood stoves and other fuel-burning appliances are primary heat sources in their homes. To prevent fires, follow these tips:

- Check the manufacturer's instructions for the safe use of the fire.
- Check the chimney for blockages and clean it regularly.
- Check the flue for proper operation and clean it regularly.
- Check the flue for proper operation and clean it regularly.
- Check the flue for proper operation and clean it regularly.

Heating fires account for 30% of residential home fires in rural areas every year. Take the following tips to ensure the safety of the home:

- Check the manufacturer's instructions for the safe use of the fire.
- Check the chimney for blockages and clean it regularly.
- Check the flue for proper operation and clean it regularly.
- Check the flue for proper operation and clean it regularly.
- Check the flue for proper operation and clean it regularly.

Key Takeaways and Wood Stoves (Cont.)

- Have your chimney or wood stove inspected and cleaned annually by a certified chimney specialist.

- Clear the area around the hearth of debris, decorations, and flammable materials.
- Leave glass doors open while burning a fire. Leaving the doors open ensures that the fire receives enough air to ensure complete combustion and keeps smoke from building up in the chimney.
- Avoid smoking clothes, hair, hair, shoes, bedding, sleeves, when cooking.
- Never smoke in bed or large burning appliances unattended.
- Place fire extinguishers in key locations at home, work and school.
- Practice fire drills with family members.
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- Do not smoke smoking ashes in a trash can, and keep ashtrays away from upholstered furniture and curtains.
- Never leave portable space heaters near flammable materials (such as, drapes).

Safe Burn Tips

- Never use flammable liquids to start a fire.
- Use only seasoned hardwood. Soft, moist wood accelerates creosote buildup.
- Build small fires that burn completely and produce less smoke.
- Never burn cardboard boxes, trash or debris in your fireplace or wood stove.
- When building a fire, place logs at the rear of the fireplace on an adequate supporting grate.
- Never leave a fire in the fireplace unattended. Extinguish the fire before going to bed or leaving the house.

- Smoke detectors in your apartment should be in a large container outside your home.
- Smoke fires, so crawl out to the ground where the air will be freshest.
- Get out quickly if it is safe to leave. Cover your nose and mouth with a cloth (not if possible).
- Test smoke detectors and space heaters doors with the back of your hand. If the door is warm, try another escape route. If it is cool, open it slowly. Check to make sure your escape path is clear of fire and smoke.
- Use the stairs. Never use an elevator during a fire.
- Call the fire department for assistance if you are trapped. If you cannot get to a phone, yell out help and the fire department will try to find a way to reach you. Do not attempt to enter a fire.
- Do not use a fire extinguisher unless you are trained to use it. Do not use a fire extinguisher unless you are trained to use it. Do not use a fire extinguisher unless you are trained to use it.

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From the top and burn, or the fire may cause a fire of uncontrolled size and debris in the house. Although a smoldering smoke alarm reduces the risk of death from residential fire by at least 30%, only about three quarters of U.S. households reported having one that functions.

For more information on fire safety, visit the National Fire Protection Association's website at www.nfpa.org.

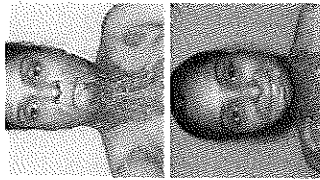
The miracle surgery for burns.

It's simple. It takes just a few hours. And costs just \$500. That's all it takes to dramatically improve the life of a poor child who has been severely burned.

In developing countries, because of lack of care, much of the damage from severe burns happens AFTER the initial accident or injury. Often the burned skin fuses with other skin and then over time it contracts. This can cause all kinds of horrible things to happen. A child's chin can become fused with their chest. Fingers and toes can become fused together. Arms and legs can become fused. Anywhere burned skin comes in contact with other skin – it can become permanently fused which can cause crippling conditions that severely inhibit movement and motion. The consequences for a child are devastating. It is almost impossible to survive in a developing country if you can't walk, or use your arms and fingers, or if you have your chin glued to your chest.

Thankfully, there is a miracle surgery that can remedy this problem fairly quickly and inexpensively. The surgeon simply cuts through the fused sections of skin and "releases" the two areas. Skin grafts are used to cover the exposed areas. And though there is inevitable and unavoidable scarring, the improvement in movement and motion is life-changing for these children.

After surgery they can walk again. Use their fingers and arms. Lift their head up from their chest. This miracle surgery makes a profound difference in the quality of life for these children. In just a few hours, and for just a few hundred dollars, it can save them from a lifetime of pain and suffering. And give them a second chance at life that they never thought they'd get.



Please help us save a child who has been severely burned.

There's a miracle surgery that can save a child from a lifetime of pain and suffering.

It costs just \$500.

But millions of children who are poor will never receive it unless someone helps them.

You could be that someone.



BURNO RESCUE

Life changing surgeries for severely burned children.

www.BurnRescue.org
P.O. Box 96051, Washington, DC 20090-6051

BurnRescue is a 501(c)(3) nonprofit organization. We are a 501(c)(3) nonprofit organization. All donations are tax deductible to the extent allowed by the IRS. All BurnRescue

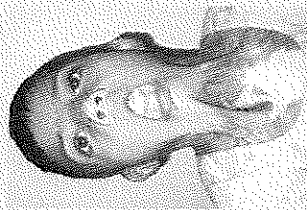
Help save a child who has been severely burned.



BURNO RESCUE

Life-changing surgeries for severely burned children.

15 million severely burned children are waiting for a miracle surgery that costs \$500.



It is one of the biggest medical problems in the developing world. Bigger than tuberculosis and HIV combined.

In the developing world, where billions still heat, light and cook with open fires, someone is horribly burned every five seconds.

Most burn victims die due to lack of acute care facilities. The "lucky" ones who live are often so deformed and disfigured, they face a lifetime of pain and suffering. A burn injury not only disfigures, it can destroy movement and function. It can prevent a child from walking. It can turn a hand into a closed fist. It can fuse legs, arms, fingers together forever.

The consequences are devastating. Most severely burned children are treated like social outcasts. They're not allowed to attend school, get a job or marry. Often they're kept hidden away in shame at home, a burden to their families. Their lives are over before they've begun. They have no hope, no future, no chance.

Children with severe burns suffer their entire lives because they can't afford a miracle surgery that costs just \$500.

BurnRescue was created to help the millions of children in developing countries who have been severely burned.

But we can't do it without your help. Please help us save a child from a lifetime of pain and suffering.

One donation, one time, for one child, can provide a miracle surgery that will change a child's life forever.

BurnRescue is a well-managed, highly effective program.

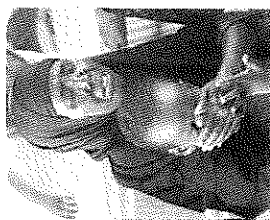
WE EMPOWER LOCAL SURGEONS AND HOSPITALS IN DEVELOPING COUNTRIES.

Instead of sending doctors on 2-week missions, BurnRescue empowers local surgeons through free training, equipment and crucial financial support. This is by far the smartest, most cost-effective and productive way to deliver surgeries for poor children in developing countries. We're helping very poor but very proud communities become self-sufficient one patient at a time.



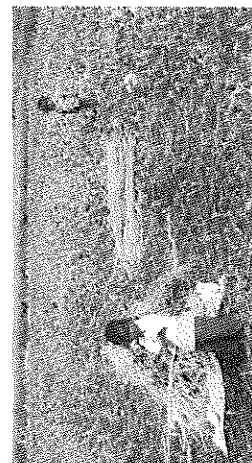
SETTING HIGH STANDARDS FOR PATIENT SAFETY AND QUALITY.

The safety of our patients is always our #1 priority. Our protocols and policies ensure our patients receive the best care possible. We audit results and provide free training for all of our partners.



HELPING PATIENTS NO ONE ELSE WILL HELP.

We work in the poorest countries in the world. We tackle problems no one else will touch. We go to places other charities won't go. We help children who have been waiting for years, sometimes decades, for the miracle cure that can save them.



EXTREMELY LOW OVERHEAD AND ADMINISTRATIVE COSTS.

We are one of several WonderWork charity programs that are helping children suffering with major medical problems in the developing world. By sharing office space, personnel, equipment, furniture, etc. it will save us millions of dollars. Our staff is tiny. Our rent is half what everyone else is paying and our offices came with free furniture. All of our email, file servers and even telephones are up in the cloud. This means much more of YOUR donation goes to what you want it to: helping children.



WE'RE A BRAND NEW PROGRAM — WITH 150+ YEARS OF EXPERIENCE.

Our senior managers have created and led some of the most well-known and successful surgical charities in the world. Some of them have been helping provide free surgeries for children in developing



countries since the early 1980s. Altogether they've already provided almost 1 million surgeries in 80 of the world's poorest countries. BurnRescue is using all of that experience and talent to create the world's first major program that is focused on burns. Helping children no one else will help. With a miracle cure that can give them back their future — and a second chance at life that they never thought they'd get.

Yes, I want to help a suffering child...

- () \$200 to provide a surgery
- () \$250 supports hospital stay and medications
- () \$125 to provide surgical supplies
- () \$75 for follow-up treatments
- () \$_____ Any amount will help

ALL DONATIONS OF \$250 AND ABOVE
MAKE YOU ONE OF OUR FAVORITE DONORS!

- ☐ Please come to updates about BurnRescue.
- ☐ We like to receive limited communications.
- ☐ Please do not ask us for another donation.
Please allow 3 weeks to be certain how we really feel.
Thank you for your patience and understanding.

If you prefer to receive your gift as a
check, please send back the check
to: BurnRescue, P.O. Box 98054, Washington, DC 20090-8054.

F153478299 BA13041726XXX00812



Life-changing surgeries for
severely burned children.

Send us a donation to help
a severely burned child
and we'll never ask you
for another one!

Dear Friend,

Imagine you are an 8-year-old girl who accidentally fell
into a fire.

You live in one of the world's poorest countries. In a
refugee camp in a small hut made of sticks with a floor made
of mud. And even though you survived 2nd and 3rd degree
burns, they caused your chin to melt to your chest. Without
surgery, your chin will be forever connected to your chest.

I recently met a girl who was horribly burned like this. It
was 110 degrees at Dadaab, the world's largest refugee camp
on the Somali border and I was there working for a charity
I co founded called Smile Train. Over the past decade, as
President of Smile Train, my team and I helped provide more
than 700,000 free cleft surgeries for children.

But there was nothing we could do to help this girl. Because we only provided cleft
surgeries.

I am sure this poor girl is still there today. With her skin fused together. Crying
because she will never go to school. Have any friends. And will never marry. Her life
is over before it even began. One horrible accident in a
matter of seconds has left her with no future, no hope,
no chance.

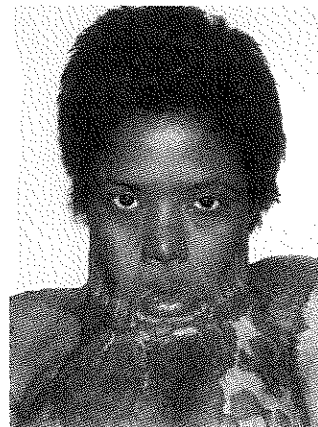
The saddest part of this story is that it *could* have a
happy ending.

There's a surgery that can save children who've
suffered horrific burns.

It's more of a miracle than a surgery. One that can
separate skin that has fused together and give a
burned child a second chance at life.

The most amazing part is what this miracle surgery
costs. Not tens of thousands of dollars. Not thousands
of dollars. It costs just \$500. To save a desperate
child from a lifetime of pain and suffering. Imagine
going through life with your chin attached to your
chest. Imagine how much you would pay to save your
laughter from this fate.

Think how much this would mean to this girl?



BurnRescue

BurnRescue, P.O. Box 98054, Washington, DC 20090-8054 www.BurnRescue.org

WON-EX 9068

Visit our web site at www.BurnRescue.org to make a secure donation online.
Enclosed is my check payable to BurnRescue. If you prefer, we accept:

() MasterCard () VISA () American Express () Discover

Card# _____ CVV# _____ Exp. Date ____/____/____

Signature _____

BurnRescue sometimes allows other worthy organizations to mail to our donors.
If you do not wish to receive these mailings or if you'd like to change the
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non-profit, charitable organization recognized by the IRS. All donations are tax
deductible in accordance with the law.

**BURN
RESCUE**

Lifesaving surgeries for
severely burned children.

P.O. Box 98054
Washington, DC 20090-0544

To regain the use of her fingers and arms.

To make friends and go to school.

To her parents who worry how their daughter will survive when they are gone.

In the developing world, where billions still heat, light and cook with open fires,
burns are a massive problem. Bigger than tuberculosis and HIV combined. Bigger than
breast cancer. Burns afflict an estimated 15,000,000 children. Millions of children
die because of lack of acute care facilities. The "lucky" ones who live are often so
deformed and disfigured, they face a lifetime of pain and suffering.

A burn injury not only disfigures, it can destroy
movement and function. It can prevent a child from
walking. It can turn a hand into a closed fist. It
can fuse a chin to a chest forever.

The good news is that the vast majority of these
kids could be saved by a miracle surgery that
costs just \$500.

That's why we started BurnRescue.

To help 15 million children who are suffering
with burns.

To provide a miracle surgery that can give
desperate children their future back - and a
second chance at life that they never thought
they'd get.

To help children no one else will help.

But we can't do anything without your help.

We receive no support from the government. Or
large corporations. 99% of our funding comes
from generous donors like you.

YOU can make a miracle happen for a child that
desperately needs it.

YOU can save a child from a lifetime of heartache and suffering.

YOU can change a child's life with one donation, one gift, one time.

Please. Send us a donation of any amount and we will use it to change a child's
life. To thank you, I will also send you a photo of a child we've helped.

Something you can put on your fridge - that will also put a smile on your face.

Thank you for helping us.



Brian Maillekey
Co-Founder
BurnRescue



Thanks for
helping us!

P.S. It only takes one gift to help save a child from a lifetime of suffering.
If you'd like this to be your only donation, check the box on the enclosed reply
form and we'll honor your request.

P.P.S. A donation of \$250 or more will make you a Founding Donor of BurnRescue.

WON-EX 9069

P.O. Box 96055, Washington, DC 20090-6055



Brian Mullaney
Co-Founder



Send us a donation to help a child
suffering with clubfoot and we'll
never ask you for another one!



Date: 12/04/12 **Stages:** FINAL

Inks: 4CP

Project: MW FirstStep January Acquisition
Size: 11x6.5 **Stock:** White

IWCG Job No: 2012549
Component: CF OSE

WON-EX 9070

FirstStep
PO BOX 96055
Washington, DC 20090-6055

Attention: Brian

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IWCG Job No: 2013080
Component: RAE

Project: WW FirstStep April Acquisition
Size: #9 Stock: white Ink: 1/1; MIS 2727

Date: 03/15/13 Stage: FINAL

(Continued on page 2) *Virginia's Charitable Contribution Deduction Program*. Your gift is very much appreciated and fully deductible to a charitable contribution. A copy of our latest learned report may be obtained by sending to: **WILLIAMSON, INC.**, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **FLORIDA** - A COPY OF THE OFFICIAL RECORDS OF THE FLORIDA DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **NEW YORK** - A COPY OF THE OFFICIAL RECORDS OF THE NEW YORK DEPARTMENT OF TAXATION, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **NEW JERSEY** - A COPY OF THE OFFICIAL RECORDS OF THE NEW JERSEY DEPARTMENT OF TREASURY, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **MISSISSIPPI** - A COPY OF THE OFFICIAL RECORDS OF THE MISSISSIPPI DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **MISSOURI** - A COPY OF THE OFFICIAL RECORDS OF THE MISSOURI DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **NEBRASKA** - A COPY OF THE OFFICIAL RECORDS OF THE NEBRASKA DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **NORTH CAROLINA** - A COPY OF THE OFFICIAL RECORDS OF THE NORTH CAROLINA DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **NORTH DAKOTA** - A COPY OF THE OFFICIAL RECORDS OF THE NORTH DAKOTA DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **OHIO** - A COPY OF THE OFFICIAL RECORDS OF THE OHIO DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **OKLAHOMA** - A COPY OF THE OFFICIAL RECORDS OF THE OKLAHOMA DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **PENNSYLVANIA** - A COPY OF THE OFFICIAL RECORDS OF THE PENNSYLVANIA DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **RHODE ISLAND** - A COPY OF THE OFFICIAL RECORDS OF THE RHODE ISLAND DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **SOUTH CAROLINA** - A COPY OF THE OFFICIAL RECORDS OF THE SOUTH CAROLINA DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **SOUTH DAKOTA** - A COPY OF THE OFFICIAL RECORDS OF THE SOUTH DAKOTA DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **TENNESSEE** - A COPY OF THE OFFICIAL RECORDS OF THE TENNESSEE DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **TEXAS** - A COPY OF THE OFFICIAL RECORDS OF THE TEXAS DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **VIRGINIA** - A COPY OF THE OFFICIAL RECORDS OF THE VIRGINIA DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **WASHINGTON** - A COPY OF THE OFFICIAL RECORDS OF THE WASHINGTON DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **WEST VIRGINIA** - A COPY OF THE OFFICIAL RECORDS OF THE WEST VIRGINIA DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **WISCONSIN** - A COPY OF THE OFFICIAL RECORDS OF THE WISCONSIN DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448. **WYOMING** - A COPY OF THE OFFICIAL RECORDS OF THE WYOMING DEPARTMENT OF REVENUE, 10000 WOODBRIDGE AVENUE, SUITE 100, FARMERS BRANCH, TEXAS 75448.



curing
clubfoot

Information about clubfoot

WCD Job No: 2-100
Component: 1-1000000-1

Project: WCD - hards&step Layout 1
Start: 11/15/12
End: 11/15/12
Status: 0000

What is clubfoot?

Clubfoot, also known as talipes equinovarus, is a congenital condition that causes one or both feet to be turned inward and down. Approximately one out of every 1,000 children is born with clubfoot, and it is the most common birth defect in the world. An estimated 10% of the cases can be found in developing nations.

An estimated 7,000,000 children live with untreated clubfoot. Almost half of all clubfoot cases are bilateral, which means that both feet are affected. Clubfoot is about five or six times more common in boys than in girls.

When a child is born with clubfoot, the tendons in the leg and foot are tighter than normal. They pull the foot into an abnormal position, which results in bone deformity. This deformity is reversible with early treatment.

In a normal foot, the ankle rests at a 90-degree angle and the foot is turned outward. In a child with clubfoot, the foot is turned inward and the ankle rests at a 180-degree angle. The result of clubfoot ranges from mild to severe. In some severe cases, it may cause the foot to turn inside down. Clubfoot can affect both feet, known as bilateral, or it may only affect one foot, known as unilateral.

How is clubfoot diagnosed?

Clubfoot is diagnosed with a simple physical exam. Sometimes doctors may do additional tests, like X-rays.

Clubfoot can sometimes be seen on an ultrasound before birth. Even though it cannot be treated in-utero, the doctor can tell the kind of care diagnosis can help patients receive and plan for treatment. The earlier the treatment, the higher the chances are of success.

What is the cause of clubfoot?

The cause is not known, but the condition may be passed down through families. In some cases, genetic influences increase the risk of clubfoot, especially if one or more close family members have been said clubfoot. It is also linked to some

- Gender—Boys are twice as likely as girls to be born with clubfoot.
- Family history—if a parent or another child had clubfoot, the risk increases.

Clubfoot is not caused by anything the mother did or did not do during pregnancy.

What is the treatment for clubfoot?

The Ponseti method, developed by Dr. Ignacio Ponseti, is a minimally invasive non-surgical treatment for clubfoot. The method is manipulative and placed in a series of casts to maintain the corrected position. In just 6 to 8 weeks, the bones naturally straighten the bones, tendons, and muscles into proper alignment. This method is particularly suited for developing countries where there are few orthopedic surgeons. The technique is easy to learn for health professionals, is very cost-effective, and is 95% effective.

From the post-cast, the Ponseti method has become the main treatment for clubfoot, and it is increasingly being used to help children with clubfoot in the developing world.

Some severe cases of clubfoot may need surgery if other treatments are not successful. Surgery is usually performed on the foot and is usually followed by a health care provider until the foot is fully grown.

What is the Ponseti treatment for clubfoot?

The position, placement, and timing of the casts are different, and according to stretch and rotate the foot into a proper position. Over a series of weeks, the foot is manipulated and the casts are replaced in a process called serial casting. The casts are applied to maintain the correction of the foot.

In most cases, this manipulation and casting are sufficient to correct the clubfoot deformity. Additionally, a small procedure may be necessary to cut the tight Achilles tendon to allow the foot to assume its normal position. Once the casts are removed, the child will usually wear nighttime braces until about age five.

Does the Ponseti method always work?

The Ponseti method is almost always completely successful, with success rates over 95%. In some severe cases, surgery may be required to correct the position of the clubfoot. Most cases of clubfoot are treated in cases where the child has other medical problems, so if the child requires treatment for another condition, the Ponseti method is completed, the leg is cast in place, and the child is released.

What should I do if I have a child with clubfoot?

Parents of infants born with clubfoot should be reassured that if their baby is treated using the Ponseti Method, the baby should have normal hearing and good mobility and function. Treatment should begin in the first week of life of the child. If treated early on in life and treated properly, a baby that has no other complications should be able to lead a full, normal life, which includes playing sports.

Less than 5% of infants born with clubfoot may have such severe cases that they require special treatment and may need surgery, which could create problems later on in life.

When should treatment for clubfoot begin?

The treatment for clubfoot should start as soon as possible in a child's life. The Ponseti method is usually started in the baby's first two weeks of life. Though not if started in infancy, surgery can also be done in older children.

What are signs to watch for during and after treatment?

If your child is being treated for clubfoot, call your health care provider if:

- The foot swells, blisters, or changes color under the cast
- The cast appears to be causing significant pain
- The foot disappears into the cast
- The cast gets so hot
- The foot begins to turn in again after treatment
- Your child develops a fever
- Your child develops rashes
- A greenish drainage is coming from the cast.

Are there possible complications?

Clubfoot may not be completely fixed, however, treatment can improve the child's mobility and the child's life. The child may be less vulnerable if the clubfoot is fixed to other birth disorders.

What happens if the clubfoot relapses?

Clubfoot tends to relapse without proper care after the stretching and casting process. In order to prevent the foot from moving back to the abnormal position, the child must wear a brace.

What if clubfoot goes untreated?

If clubfoot is left untreated, it will lead to the inability to walk, painless, and/or chronic pain.

Can surgery cure clubfoot?

Surgery does not "cure" clubfoot. It improves the appearance of the foot, but it does not change the shape of the foot. The foot and leg casting supports used in the surgical correction break the motion of the foot joints, and the foot often becomes painful at night.

In addition, the recurrence of the deformity can occur even after surgery. Foot and ankle surgeons have noticed that adult patients who were surgically treated for clubfoot in infancy have weak, stiff and often very painful feet.

If clubfoot repair surgery is needed, what is involved?

The type of surgery that is done depends on:

- How serious the clubfoot is.
- Your child's age.
- What other treatments your child has had during the surgery.

Ligaments are tissues that help hold the bones together in the body. Tendons are tissues that help attach muscles to bones. A clubfoot occurs when tight ligaments and tendons prevent the foot from moving into its right position.

In most cases, one or two cuts are made in the skin, most often on the back of the foot and around the inside part of the foot.

- Your child's surgeon may make the incision around the foot longer or shorter. The Achilles tendon at the back of the foot is almost always cut.

- Older children or more severe cases may need some bone and bone cut.
- Sometimes, pins are placed in the foot.
- A cast is placed on the foot after surgery to keep it in position while it heals. Sometimes a splint is put on first, and the cast is placed a few days later.

Older children who still have a foot deformity after surgery may need more surgery. Also, children who have not had surgery yet may need surgery as they grow. Types of surgery they may need include:

- Osteotomy: Removing part of the bone.
- Fusion or arthrodesis: Join or more bones are joined together. The surgeon uses pins from somewhere else in the body.
- Bone grafts or plates may be used to help the bones heal after a surgery.

Why is the surgery performed?

A baby who is born with a clubfoot is first treated with a cast to stretch the foot into a more normal position.

- A foot cast can be used over a cast so the foot can be stretched into position.
- Cast changes continue for about 2 months. After casting, the child wears a shoe for several years.

Clubfoot repair surgery may be needed if:

- The cast or other treatment did not fully correct the problem.
- The problem caused back

Older children or adults may need surgery if:

- A clubfoot was never treated
- They get a bone foot problem after treatment

What are the risks of surgery?

- Feet from any surgery are:
- Bruised
- Swollen
- Reddened
- Infected

Possible problems from clubfoot surgery are:

- Difficulty to move in the foot
- Foot swelling
- Problems with blood flow to the foot
- Wound-healing problems

What happens before clubfoot repair surgery?

Your child's doctor may:

- Take a medical history of your child

- Do a complete physical examination of your child
- Do x-rays of the clubfoot
- Test your child's blood for a complete blood count and blood electrolytes or kidney function

Always tell your child's doctor or nurse:

- What drugs your child is taking
- Inside drugs, herbs, and vitamins you bought without a prescription

During the days before the surgery:

- About 4 days before the surgery, you may be asked to stop giving your child aspirin, ibuprofen (Motrin, Advil), or any other drugs that make it hard for your child's blood to clot.
- Ask your child's doctor which drugs your child should stop taking on the day of the surgery.

On the day of the surgery:

- Usually, your child will not be able to drink or eat anything for 4 to 6 hours before the surgery.
- Day after your child's surgery, you will go to visit with any medical staff who told you to care your child.
- Your child's doctor or nurse will tell you when to drive for the surgery.

What happens after surgery?

Depending on the surgery that is done, your child may go home on the same day or stay in the hospital for 1 to 3 days after the surgery. The hospital stay may be longer if surgery was also done on the bones.

The child's foot should be kept in a relaxed position. Mediators may help control the pain.

The skin around your child's cast will be checked often to make sure it stays pink and healthy. Your child's toes should be checked to make sure they are pink and your child can move and feel them. There are signs of proper blood flow.

Your child will have a cast on for 6 to 12 weeks. If they do changed several times. Before your child leaves the hospital, you will be taught how to take care of the cast.

When the cast is taken off, your child's doctor will probably prescribe a brace, and may refer your child for physical therapy. The therapist will teach you exercises to do with your child to strengthen the foot and make sure it stays flexible.

What is the prognosis following surgery?

After the cast is taken off, your child's foot will be in a much better position. Your child should be able to have a normal, active life, including playing sports. But the foot may be stiffer than a foot that has not been treated with surgery.

In most cases of clubfoot, if only one side is affected, the child's foot and cast will be smaller than the cast for the rest of the child's life.

Children who have had clubfoot surgery may need another surgery later in life.

Foot club is a medical condition, but it is not a disease. It is a condition that is not inherited as a condition for genetic condition. It is a condition that is not inherited as a condition for genetic condition. It is a condition that is not inherited as a condition for genetic condition.

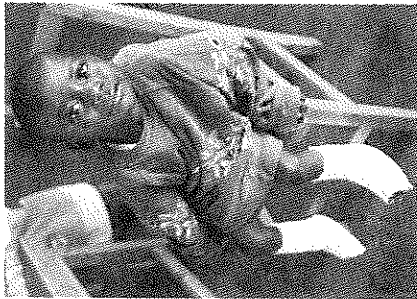
Clubfoot is a medical condition, but it is not a disease. It is a condition that is not inherited as a condition for genetic condition. It is a condition that is not inherited as a condition for genetic condition. It is a condition that is not inherited as a condition for genetic condition.

The miracle cure for clubfoot costs \$250.

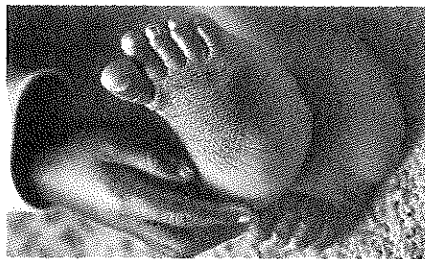
Instead of trying to cure clubfoot through surgery as was done for decades, the patient's feet are put into a series of casts. Each week, the patient comes back and a new cast is put on.

Gradually, over six weeks, these casts straighten the feet just as braces are used to straighten crooked teeth.

After the feet are completely straightened, the child needs to wear braces, at night, to keep the feet from slipping out of alignment. The braces are no longer needed after a few years.



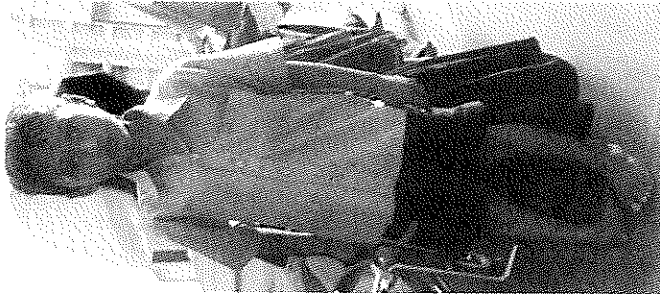
The end result — in 95% of the cases — are perfectly straight feet that will stay straight for the rest of the child's life. This miracle cure for clubfoot is by far the most effective, affordable and practical approach to fixing clubfoot in the world. The only problem is that because of extreme poverty, more than 2 million children in the developing world can't afford this cure — even though it costs just \$250.



Please help us save children who're suffering with clubfoot.

There's a miracle cure for clubfoot. It's safe, proven, effective 95% of the time and it costs just \$250. Imagine that, \$250 is all it takes to save a child from a lifetime of pain and suffering.

But millions of children who are poor will not be saved unless someone helps them. You could be that *someone*.



P.O. Box 96055, Washington, DC 20090-6055
www.1stStep.org

FirstStep is a Washington, D.C. charity program. WonderWorks, Inc. is a 501(c)(3) nonprofit charitable organization registered by the IRS. All donations are tax deductible to the extent allowed by IRS regulations. © 2010 FirstStep

You can help a child walk for the first time in his life.



2 million children with clubfoot are waiting for a miracle cure that costs just \$250.

For less than the cost of a pair of fancy shoes, you can save a child who is suffering with one of the worst birth defects in the world: clubfoot.



Clubfoot is when a baby is born with one or both feet severely deformed and twisted inward. It can be mild or severe. This painful, crippling condition can prevent children from ever being able to stand or walk.

Most children with clubfoot in the developing world are treated like social outcasts. They're not allowed to attend school, get a job, marry or raise a family. They have no hope, no future, no chance.

These children suffer their entire lives because they don't have \$250.



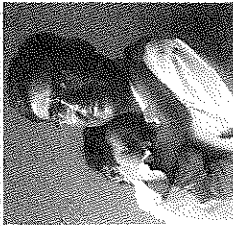
FirstStep was created to help the millions of children in developing countries who are suffering with clubfoot.

But we can't do it without your help.

With one donation, one time, for one child, you can provide a miracle cure that will change a child's life forever.

FirstStep is a high-impact, low-overhead program.

WE EMPOWER LOCAL DOCTORS AND HOSPITALS IN DEVELOPING COUNTRIES.



Instead of sending doctors on 2-week missions, FirstStep empowers local doctors through free training, equipment and crucial financial support. This is by far the smartest, most cost-effective and productive way to deliver care to poor children in developing countries. We're helping very poor but very proud communities become self-sufficient one patient at a time.

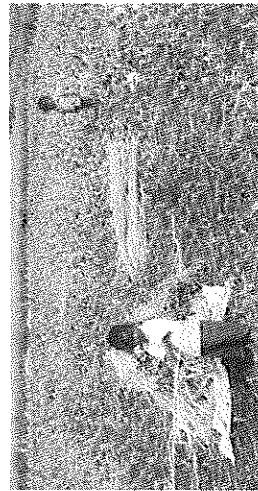
SETTING HIGH STANDARDS FOR PATIENT SAFETY AND QUALITY.



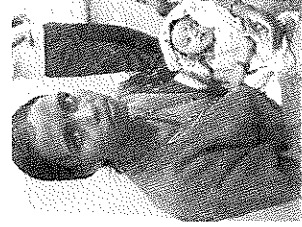
The safety of our patients is always our #1 priority. Our protocols and policies ensure our patients receive the best care possible. We audit results and provide free training for all of our partners.

HELPING PATIENTS NO ONE ELSE WILL HELP.

We work in the poorest countries in the world. We tackle problems no one else will touch. We go to places other charities won't go. We help children who have been waiting for years, sometimes decades, for the miracle cure that can save them.



EXTREMELY LOW OVERHEAD AND ADMIN COSTS.



We are one of several WonderWork non-profit programs that are helping children suffering with major medical problems in the developing world. By sharing office space, personnel, equipment, furniture, etc. it will save us millions of dollars. Our staff is tiny. Our rent is half what everyone else is paying and our offices came with free furniture. All of our email, file servers and even telephones are up in the cloud. This means much more of YOUR donation goes to what you want it to: helping children.

WE'RE A BRAND NEW PROGRAM — WITH 150+ YEARS OF EXPERIENCE.



Our senior managers have created and led some of the most well-known and successful surgical charities in the world. Some of them have been helping provide free surgeries for children in developing countries since the early 1980s.

Altogether we've already provided more than 1 million surgeries in 80 of the world's poorest countries. FirstStep is using all of that experience and talent to create the world's first major program that is focused on solving clubfoot. Helping children no one else will help. With a miracle cure that can give them back their future — and a second chance at life that they never thought they'd get.

Yes, I want to help a suffering child...

- () \$500 to cure two children with clubfoot
- () \$250 to cure one child with clubfoot
- () \$125 to provide necessary medical supplies
- () \$75 for follow-up treatments
- () _____ Any amount will help

- ☐ Please send an update about FirstStep.
- ☐ I'd like to receive future communications.
- ☐ Please do not ask me for another donation.
Please give a dollar to be spared from our mailing list.
Thanks for your patience as we process your request.

If you prefer to donate your gift to a
child, please indicate the child's
name and age on the back of this form.

F149658145 CA13041720XXD18C3



Send us a donation to help
a child suffering with clubfoot
and we'll never ask you for another one!

Dear Friend,

Imagine if you were a 7-year-old girl who was born with clubfoot - one of the world's worst birth defects.

And you lived in one of the world's poorest countries, in a refugee camp. In a small hut made of sticks and a floor made of mud.

Not long ago, I met such a girl and it broke my heart.

It was 100 degrees at Dadaab, the world's largest refugee camp on the Somali border and I was there working for a charity I co-founded called Smile Train. Over the past decade, as President of Smile Train, my team and I helped provide more than 700,000 free cleft surgeries for children.

But there was nothing we could do to help this girl because we only provided cleft surgeries.

I am sure this poor girl is still there today. Crawling because she can't walk. Crying because she can't go to school. Have any friends. And will never marry. Her life is over before it even began. The picture I took of her shows a child who has no future, no hope, no chance.

The saddest part of this story is that it *could* have a happy ending.

They've invented a cure for clubfoot.

It's more of a miracle than a cure. One that can straighten even the most twisted and deformed feet. Permanently.

The most amazing part is what it costs. Not tens of thousands of dollars. Not thousands of dollars. It costs just \$250. To save a desperate child from a lifetime of pain and suffering. Imagine how much you would pay to save your daughter if she was born with clubfoot.

Think how this girl would feel when she can stand up on her own two feet for the first time in her life.



FirstStep, P.O. Box 96055, Washington, DC 20090-6055 www.1stStep.org

WON-EX 9077

Visit our web site at www.1stStep.org to make a secure donation online.
Enclosed is my check payable to FirstStep. If you prefer, we accept:

() MasterCard () VISA () American Express () Discover

Card# _____ CVV# _____ Exp. Date ____/____/____

Signature _____

FirstStep sometimes allows other worthy organizations to send to our donors. If you do not wish to receive these mailings or if you'd like to change the frequency of mailings from us, let us know. We are happy to respect your wishes. FirstStep is a Wonderful World program. Wonderful is a 501 (c)(3) nonprofit, charitable organization recognized by the IRS. All donations are now deductible in accordance with the law.



P.O. Box 96055, Washington, DC 20090-6055

When she can skip rope, make friends and go to school.

How much would this mean to her parents who are so worried about how their daughter will survive when they are gone.

There are more than 2,000,000 children in developing countries suffering with clubfoot. Most of them could be saved by a miracle cure that costs just \$250.

That's why we started FirstStep.

To give millions of children suffering with clubfoot the chance to stand up on their own two feet for the first time in their life.

To provide a miracle that can give a desperate child their future back — and a second chance at life that they never thought they'd get.

To help children no one else will help.

But we can't do anything without your help.

We receive no support from the government. Or large corporations. 99% of our funding comes from generous donors like you.

YOU can make a miracle happen for a child that desperately needs it.


YOU can save a child from a lifetime of heartache and suffering.

YOU can change a child's life with one donation, one gift, one time.

Please. Send us a donation of any amount and we will use it to change a child's life. To thank you, I will also send you a photo of a child we've helped.

Something you can put on your fridge — that will put a smile on your face.

Thank you for helping us.


Brian Millaney
Co-Founder
FirstStep



*Thanks for
helping us!*



*I met the boy
in Bangladesh
I met the boy
of 1st step club
and the boy was
the same*

P.S. It only takes one gift to help save a child from a lifetime of suffering. If you'd like this to be your only donation, check the box on the enclosed reply form and we'll honor your request.

P.P.S. A donation of \$250 or more will make you a Founding Donor of FirstStep.

WON-EX 9078

FUCHS
EXHIBIT 18

20/20/20
JOINT PUBLIC AWARENESS AND FUND RAISING PROGRAM
DIRECT MAIL

THEME THERE'S A 15-MINUTE SURGERY THAT CAN RESTORE THE EYESIGHT OF
CHILDREN WHO ARE COMPLETELY BLIND
PACKAGE PRIYA HOODIE CONTROL
AUDIENCE GENERAL PUBLIC
JOB# JULY THRU DECEMBER 2014 ACQUISITION

PACKAGE COMPONENTS:

- A. Letter
- B. Carrier Envelope
- C. Reply Device
- D. Reply Envelope
- E. Information About Blindness Insert
- F. One Million Children Insert

PUBLIC EDUCATION CONTENT:

A. Letter

- (1) **20 million blind children and adults are waiting for this surgery – most of them will never receive it.**
- (2) You see, even though this simple surgery costs just \$300, very few people in developing countries can afford it. When you're living on less than a dollar a day, \$300 might as well be \$3 million.
- (3) When you go blind in a developing country, your vision is but the first thing you lose. When a 42-year-old farmer goes blind, his family starves. When a 28-year-old mother goes blind, she loses her children. When a 7-year-old child goes blind, well, they pretty much lose everything. The chance to go to school, to have friends, to ever marry and raise a family.

E. Information About Blindness Insert

- (1) **Vision Impairment and Blindness**
- (2) **Some Causes of Blindness**
- (3) **Dangers at Home**

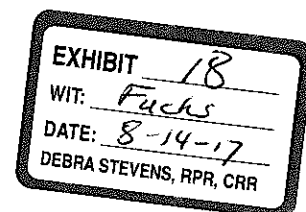
CALL(S) TO ACTION:

C. Reply Device

- (1) Please send me updates about 20/20/20. My email address is:
- (2) To watch two sisters see for the very first time, visit www.20x20x20.org.

E. Information About Blindness Insert

- (1) **Have a comprehensive dilated eye exam.**
- (2) **Know your family's eye health history.**
- (3) **Eat right to protect your sight.**
- (4) **Maintain a healthy weight.**
- (5) **Wear protective eyewear.**
- (6) **Quit smoking or never start**

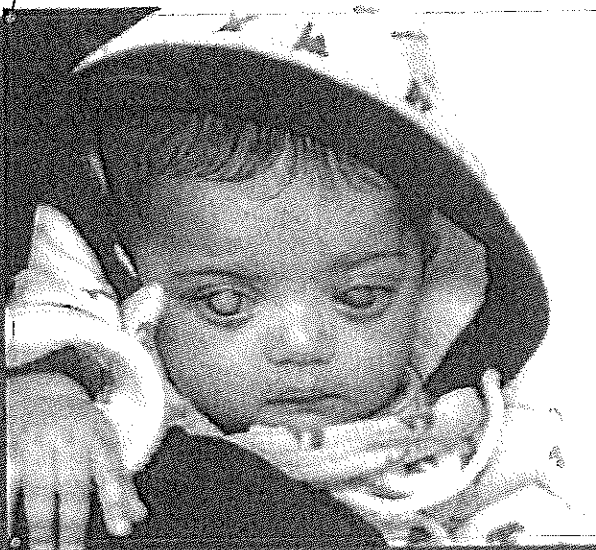


20/20/20
JOINT COST ALLOCATION
ACQUISITION JULY - DECEMBER 2014
PRIYA HOODIE CONTROL

<u>LINES OF COPY</u>	<u>TOTAL</u>	<u>PUBLIC ED.</u>	<u>MGMT & GENERAL</u>	<u>FUNDRAISING</u>
LETTER	45	34		11
REPLY DEVICE	30	7	5	18
INFORMATION ABOUT BLINDNESS INSERT	65	65		
ONE MILLION CHILDREN INSERT	32	24	1	7
REPLY ENVELOPE	17		1	16
OUTSIDE ENVELOPE	4	2		2
TOTAL LINES	193	132	7	54
% OF TOTAL		68%	4%	28%

TTT1207D1

20/20/20
RESTORING 20/20 VISION
TO 20 MILLION BLIND
CHILDREN AND ADULTS
P.O. Box 96669
Washington, DC 20090-6669
www.20x20x20.org



There's a 15-minute surgery that
can restore the eyesight of children
who are completely blind.

Send us a donation and we'll never ask for another!

One of "10 ideas that will change the world" — *Time Magazine*

..No Ink Area..

TTTCNOE

111

Yes! I want to restore the eyesight
of a blind child or adult.

112



To donate online please visit
www.20x20x20.org

20/20/20

RESTORING 20/20 VISION
TO 20 MILLION BLIND
CHILDREN AND ADULTS

- 113 ☐ \$300 that can provide a full surgery ☐ \$50 that can provide surgical supplies for two eye surgeries
114 ☐ \$150 that can provide half a surgery ☐ \$25 that can provide surgical supplies for one eye surgery
115 ☐ \$75 that can provide anesthesia ☐ \$5 any amount will help

Make it Monthly!
See details on www.20x20x20.org

116 A \$300 donation
makes you a
FUNDING BOSS!

- ☐ Please send me updates about 20/20/20. 117
☐ I'd like to receive linked communications.
☐ Please do not ask me for another donation. 118
(Please allow 4 weeks to be removed from our mailing list.
Thanks for your patience as we process your request.) 119

My email address is: _____

120 To watch two sisters see for the very first time, visit www.20x20x20.org.

121 Please email this info form with your check payable to 20/20/20 in the envelope
provided. Thank you! To make a gift with a credit card, please see other side.

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Field

C:J01P

FOR PRODUCE/ARRAY REFERENCE ON PDU
TESTS - THIS WILL NOT PRINT ON PRODUCTION
PHOTO - PRODUCE - 04

20/20/20
RESTORING 20/20 VISION
TO 20 MILLION BLIND
CHILDREN AND ADULTS

66 One donation from you
can restore the eyesight of a
67 blind child or adult.
(And we'll never ask for another)

Dear _____

66 Imagine if your daughter suddenly became blind at the age of three.

69 You learn there's a surgery that can restore her eyesight, but you can't afford it. You go
70 from hospital to hospital begging for help. You try to borrow the money but can't. Years go by
71 as you watch your daughter sit at home alone, with no school, no friends and no future. You
72 know the only reason she remains blind is because you can't afford the surgery that can save her.

73 I recently met such a man and his 9-year-old daughter
in India.

74 After six years of trying, he was about to give up when
75 he saw a small newspaper ad offering free surgery for the
76 blind. He and his daughter Priya traveled 100+ kilometers
77 to reach our partner hospital where I met them. The surgery
78 Priya waited six years for took just 15 minutes. When her
79 bandages came off, she opened her eyes and could see again.
Her father cried. So did we.

80 I've seen a lot of suffering over the past 20 years as
81 I traveled to many of the world's poorest countries such as
82 Haiti, Afghanistan, India and Somalia. As the co-founder
83 and former CEO of Smile Train, I helped provide free cleft
surgery for more than 700,000 children.

84 But I have never experienced anything as powerful, as inspiring or as wonderful as
85 watching someone who is blind, open their eyes and see.

86 It's about the closest thing to a miracle I've ever seen.

Folk

87 Just a simple 15-minute surgery that costs just \$300 and doesn't even require stitches. The
88 next morning the bandages come off, the eyes open and just like that, someone gets a second
89 chance at life that they never thought they'd get.

There's only one problem.

90 20 million blind children and adults are waiting for this surgery – and most of them
will never receive it.

91 You see, even though this simple surgery costs just \$300, very few people in developing
92 countries can afford it. When you're living on less than a dollar a day, \$300 might as well be
\$3 million.

93 As a result, millions of children and adults will remain blind for the rest of their lives solely
94 because they are poor. They're called the "needlessly blind." And they suffer in more ways than
you can imagine.

(over, please)



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Thank you for helping us.

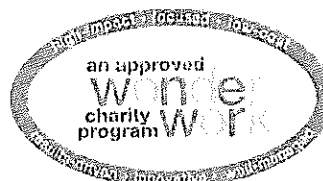


Brian Mullaney
Co-Founder

107 P.S. Millions of children and adults around the world are hoping and praying to have their eyesight
108 restored, just like Priya. Please send a gift today and see the difference you can make. Thanks again!

109 A \$100 donation makes you a FUNDING POWER!

110 THANKS FOR HELPING US!



20/20/20

RESTORING 20/20 VISION
TO 20 MILLION BLIND
CHILDREN AND ADULTS

Information About Blindness

Providing valuable public information is one of our most important programs and an important part of our mission.

2 Vision Impairment and Blindness

Vision impairment, or low vision, means that even with eyeglasses, contact lenses, medicine or surgery, you don't see well. Vision impairment can range from mild to severe. The leading causes of vision impairment and blindness in the United States are age-related eye diseases: macular degeneration, cataract and glaucoma. Other eye disorders, eye injuries, and birth defects can also cause vision loss. A loss of vision means that you may have to reorganize your life and learn new ways of doing things. If you have some vision, visual aids such as special glasses and large print books can make life easier. There are also devices to help those with no vision, like text-reading software and braille books. Sometimes, vision loss is preventable. Regular comprehensive eye exams and prompt treatment are critical.

Some Causes of Blindness

Macular Degeneration

Macular degeneration, or age-related macular degeneration (AMD), is a leading cause of vision loss in Americans 60 and older. It is a disease that destroys your sharp, central vision. You need central vision to see objects clearly and to do tasks such as reading and driving. AMD affects the macula, the part of the eye that allows you to see fine detail. It does not hurt, but it causes cells in the macula to die. There are two

types: wet and dry. Wet AMD happens when abnormal blood vessels grow under the macula. These new blood vessels often leak blood and fluid. Wet AMD damages the macula quickly. Blurred vision is a common early symptom. Dry AMD happens when the light-sensitive cells in the macula slowly break down. You gradually lose your central vision. A common early symptom is that straight lines appear crooked. Regular comprehensive eye exams can detect macular degeneration before the disease causes vision loss. Treatment can slow vision loss. It does not restore vision.

Glaucoma

Glaucoma is a group of diseases that can damage the eye's optic nerve. It is a leading cause of blindness in the United States. It usually happens when the fluid pressure inside the eyes slowly rises, damaging the optic nerve. Often there are no symptoms at first. Without treatment, people with glaucoma will slowly lose their peripheral, or side vision. They seem to be looking through a tunnel. Over time, straight-ahead vision may decrease until no vision remains. A comprehensive eye exam can tell you if you have glaucoma. People at risk should get eye exams at least every two years. They include: African Americans over age 40; people over age 60, especially Mexican Americans; people with a family history of glaucoma. There is no cure, but glaucoma can usually be controlled. Early treatment can help protect your eyes against vision loss. Treatments usually include prescription eye drops and/or surgery.

Cataracts

Cataract is a clouding of the eye's lens and is the leading cause of blindness worldwide, and the leading cause of vision loss in the United States. Cataracts can occur at any age due to a variety of causes, and can be present at birth. Although treatment for the removal of cataract is widely available, access barriers such as insurance coverage, treatment costs, patient choice, or lack of awareness prevent many people from receiving the proper treatment. An estimated 20.5 million (17.2%) Americans 40 years and older have cataract in one or both eyes, and 6.1 million (5.1%) have had their lens removed operatively. The total number of people who have cataracts is estimated to increase to 30.1 million by 2020. Common symptoms are: blurry vision, colors that seem faded, glare, not being able to see well at night, double vision, frequent prescription changes in your eye wear. Cataracts usually develop slowly. New glasses, brighter lighting, anti-glare sunglasses or magnifying lenses can help at first. Surgery is also an option. It involves removing the cloudy lens and

replacing it with an artificial lens. Wearing sunglasses and a hat with a brim to block ultraviolet sunlight may help to delay cataracts.

Congenital Cataracts

A congenital cataract is a clouding of the lens of the eye that is present at birth. The lens of the eye is normally clear. It focuses light that comes into the eye onto the retina.

Unlike most cataracts, which occur with age, congenital cataracts are present at birth. In most patients, no cause can be found. Congenital cataracts usually look different than other forms of cataract. Symptoms include: gray or white cloudiness of the pupil (which is normally black); infant doesn't seem to be able to see (if cataracts are in both eyes); "red eye" glow of the pupil is missing in photos, or is different between the two eyes; unusual rapid eye movements (nystagmus). To diagnose congenital cataract, the infant should have a complete eye examination by an ophthalmologist. The infant may also need to be examined by a pediatrician who is experienced in treating inherited disorders. Blood tests or x-rays may also be needed. If congenital cataracts are mild and do not affect vision, they may not need to be treated, especially if they are in both eyes.

Moderate to severe cataracts that affect vision, or a cataract that is in only one eye, will need to be treated with cataract removal surgery. Removing a congenital cataract is usually a safe, effective procedure. Call for an urgent appointment with your baby's health care provider if you notice that the pupil of one or both eyes appears white or cloudy, or if the child seems to have trouble seeing.

Amblyopia

Amblyopia, or "lazy eye," is the loss of one eye's ability to see details. It is the most common cause of vision problems in children. Amblyopia occurs when the nerve pathway from one eye to the brain does not develop during childhood. This occurs because the abnormal eye sends a blurred image or the wrong image to the brain. This confuses the brain, and the brain may learn to ignore the image from the weaker eye.

Strabismus is the most common cause of amblyopia. There is often a family history of this condition. The term "lazy eye" refers to amblyopia, which often occurs along with strabismus. However, amblyopia can occur without strabismus and people can have strabismus without amblyopia. Amblyopia is usually easily diagnosed with a complete

32 examination of the eyes. Special tests are usually not needed. Children who get treated before age 5 will usually recover almost completely normal vision, although they may continue to have problems with depth perception. Delaying treatment can result in permanent vision problems.

33 After age 10, only a partial recovery of vision can be expected.

Eye Injury

According to the American Academy of Ophthalmology, an estimated 90 percent of eye injuries are preventable with the use of proper safety eyewear. Even a minor injury to the cornea — like that from a small particle of dust or debris — can be painful and become a life-long issue, so take the extra precaution and always protect the eyes. If the eye is injured, seek emergency medical help immediately.

Dangers at Home

When we think of eye protection, we tend to think of people wearing hardhats and lab coats. We often forget that even at home, we might find ourselves dealing with similar threats to our eyes. Dangerous chemicals that could burn or splash the eyes aren't restricted to chemical laboratories. They're also in our garages and under our kitchen sinks.

37 Debris and other air-borne irritants are present at home, too, whether one is doing a home construction project or working in the yard. The debris from a lawnmower or "weed wacker," for example, can be moving at high speeds and provide no time to react. Some sports also put the eyes at risk of injury from foreign objects moving at high speeds.

Effective Eyewear

The best ways to prevent injury to the eye is to always wear the appropriate eye protection. The Bureau of Labor Statistics reports that approximately three out of every five workers injured were either not wearing eye protection at the time of the accident or wearing the wrong kind of eye protection for the job. To be effective, eyewear must fit properly and be effectively designed to protect the eyes based on the activity being performed. The Occupational Safety Health Administration (OSHA) has standards that require employers to provide their workers with the appropriate eye protection.

When to Wear Protective Eyewear

42 According to these standards, you (or anyone who is watching you work) should always wear properly fitted eye protective gear, such as safety glasses with side protection/shields, when: Doing work that may produce

43 particles, shivers, or dust from materials like wood, metal, plastic, cement, and drywall; hammering, sanding, grinding, or doing masonry work; working with power tools; working with chemicals, including common household chemicals like ammonia, oven cleaners, and bleach; using a lawnmower, riding mower, or other motorized gardening devices like string trimmers; working with wet or powdered cement; welding (which requires extra protection like a welding mask or helmet from sparks and UV radiation); "jumping" the battery of a motor vehicle; being a bystander to any of the above.

Sports

It's also recommended that you protect your eyes from injury when participating in certain sports, including: indoor racket sports, paintball, baseball, basketball, hockey, cycling, riding or being a passenger on a motorcycle.

Eye Health Tips

Simple Tips for Healthy Eyes

47 Your eyes are an important part of your health. There are many things you can do to keep them healthy and make sure you are seeing your best. Follow these simple steps for maintaining healthy eyes well into your golden years.

48 Have a comprehensive dilated eye exam. You might think your vision is fine or that your eyes are healthy, but visiting your eye care professional for a comprehensive dilated eye exam is the only way to really be sure.

49 When it comes to common vision problems, some people don't realize they could see better with glasses or contact lenses. In addition, many common eye diseases such as glaucoma, diabetic eye disease and age-related macular degeneration often have no warning signs. A dilated eye exam is the only way to detect these diseases in their early stages.

50 During a comprehensive dilated eye exam, your eye care professional places drops in your eyes to dilate, or widen, the pupil to allow more light to enter the eye the same way an open door lets more light into a dark room. This enables your eye care professional to get a good look at the back of the eyes and examine them for any signs of damage or disease.

51 Your eye care professional is the only one who can determine if your eyes are healthy and if you're seeing your best.

52 Know your family's eye health history. Talk to your family members about their eye health history. It's important to know if anyone has been diagnosed with a disease or condition since many are hereditary. This will help to determine if you are at higher risk for developing an eye disease or condition.

54 Eat right to protect your sight. You've heard carrots are good for your eyes. But eating a diet rich in fruits and vegetables, particularly dark leafy greens such as spinach, kale, or collard greens is important for keeping your eyes healthy, too. Research has also shown there are eye health benefits from eating fish high in omega-3 fatty acids, such as salmon, tuna, and halibut.

55 Maintain a healthy weight. Being overweight or obese increases your risk of developing diabetes and other systemic conditions, which can lead to vision loss, such as diabetic eye disease or glaucoma. If you are having trouble maintaining a healthy weight, talk to your doctor.

56 Wear protective eyewear. Wear protective eyewear when playing sports or doing activities around the home. Protective eyewear includes safety glasses and goggles, safety shields, and eye guards specially designed to provide the correct protection for a certain activity. Most protective eyewear lenses are made of polycarbonate, which is 10 times stronger than other plastics. Many eye care providers sell protective eyewear, as do some sporting goods stores.

57 Quit smoking or never start. Smoking is as bad for your eyes as it is for the rest of your body. Research has linked smoking to an increased risk of developing age-related macular degeneration, cataract, and optic nerve damage, all of which can lead to blindness.

58 Be cool and wear your shades. Sunglasses are a great fashion accessory, but their most important job is to protect your eyes from the sun's ultraviolet rays. When purchasing sunglasses, look for ones that block out 99 to 100 percent of both UV-A and UV-B radiation.

59 Give your eyes a rest. If you spend a lot of time at the computer or focusing on any one thing, you sometimes forget to blink and your eyes can get fatigued. Try the 20-20-20 rule: Every 20 minutes, look away about 20 feet in front of you for 20 seconds. This can help reduce eyestrain.

60 Practice workplace eye safety. Employers are required to provide a safe work environment. When protective eyewear is required as a part of your job, make a habit of wearing the appropriate type at all times and encourage your coworkers to do the same.

61 Information was derived from the U.S. Government National Institutes of Health, the National Eye Institute and the Centers for Disease Control and Prevention.

TTTT

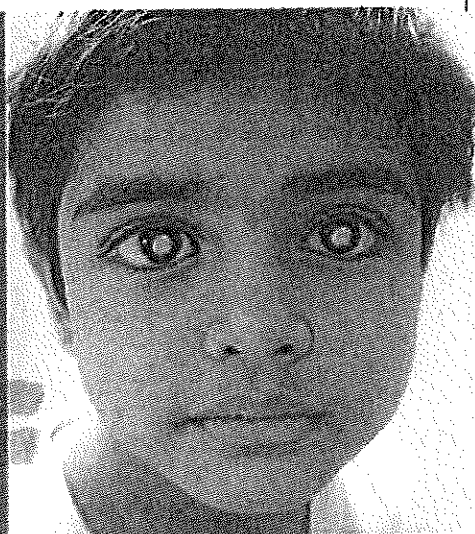
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141 In developing countries,
blindness is 500% more
prevalent than in the U.S.



146
147
Millions who are
waiting for surgery
to restore their eyesight
will never receive it unless
someone helps them.

You can be
that someone.



142 Millions of children and adults become blind
every year and it can happen at any age.

Babies are born completely blind in both eyes.

143 Children who have perfect eyesight suddenly
go blind in one eye or both.

Teenagers suffer injuries that cause them to
go completely blind.

144 Parents become blind and lose their jobs,
their income and their families.

Grandparents lose their eyesight and become
a huge burden to their families.

145 All of them could have their
eyesight restored —
if someone helps them.

20/20/20
RESTORING 20/20 VISION
TO 20 MILLION BLIND
CHILDREN AND ADULTS

P.O. Box 96669
Washington, DC 20090-6669
20x20x20.org

149
One million blind
children could have their
eyesight restored through
a \$300 surgery.

20/20/20
RESTORING 20/20 VISION
TO 20 MILLION BLIND
CHILDREN AND ADULTS

148
TTTBR

374088-ALIND

8/15/14 11:01 AM

15 minutes + \$300 = a cure for blindness

It sounds unbelievable but it's true.

- 151 Half of all the blind children and adults in the world — that's 20 million people — could have their eyesight restored through a miracle surgery that takes 15 minutes and costs \$300.

152 It is a modern-day medical miracle.

The bad news is that even at \$300, most blind children and adults in developing countries could never afford this surgery.

- 153 So millions of blind children and adults — who are often referred to as the "needlessly blind" — will remain blind.

Forever.

Unless someone helps them.

- 154 That's why we started 20|20|20.

To restore 20/20 vision to 20 million blind children and adults!

To give them back not just their eyesight — but their future too.

- 155 But we can't do it without your help.

Please help us restore the vision of a child or adult who is blind.



374003 A.indd 2

20|20|20 is different than other charity programs.

- 157 We do one thing: help blind people see.

Unlike most charities that try to solve many different problems, we're focused exclusively on just one. This helps us be more productive and cost-efficient. And it makes it easy for us to measure our progress and effectiveness. Our name says it all — our mission is to help restore 20/20 vision for 20 million blind children and adults.

**We deliver results you can see
and benefits that last a lifetime.**

- 160 Unlike charities that are searching for a cure or that do things that you can't really see or appreciate, what we do is crystal clear. We provide miracle surgeries that in a matter of minutes can restore the eyesight of children and adults who are blind. Permanently.

- 162 **We give donors the opportunity
to save a child's life.**

Literally. The World Health Organization reports that in developing countries, 60% of children die within 1-2 years of going blind.

Our miracle surgeries not only can give these children their eyesight back — but their future too.

- 164 **We give donors the maximum impact
for every donation.**

Every donor wants to know that their donation, whatever amount, actually makes a difference. What could be more impactful than restoring the eyesight of a child who is completely blind? And saving them from a lifetime of suffering, pain and heartache?

- 166 20|20|20 is managed like a business.

20|20|20 has a very experienced management team that takes great pride in the fact that it is held accountable for achieving specific goals and very ambitious results. We measure and monitor everything we do. Every program, every direct mail campaign, every dollar that we spend.

**Extremely low overhead.
Sky-high productivity.**

- 169 Donors don't like charities that spend a lot on overhead and administration.

Neither do we.

- 170 We have a tiny staff working in a half-price sublet office that came with free furniture. All of our technology — email, servers, networks — is in the "cloud" which saves millions of dollars.

- 171 20|20|20 is a WonderWork charity program.

- 172 This means we share office space, personnel, computers, etc. with other charity programs in order to dramatically reduce our overhead, administration and fundraising costs.



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TTT1207D1

15 MINUTES + \$300 = A CURE FOR BLINDNESS

RESTORING 20/20 VISION
TO 20 MILLION BLIND
CHILDREN AND ADULTS



PLACE
STAMP
HERE

20/20/20

PO Box 96669
Washington, DC 20090-6669

Attention: Brian



NA141010XXXXXX

20/20/20 is a WorldWork charity program. Your gift is very much appreciated and fully deductible as a charitable contribution. A copy of our latest financial report may be obtained by writing to: 20/20/20, P.O. Box 96669, Washington, DC 20090-6669. If you are a resident of one of these states, you may obtain financial information directly from the state agency: ALABAMA - A copy of the official registration and financial information may be obtained from the state agency; ARIZONA - A copy of the official registration and financial information may be obtained from the state agency; ARKANSAS - A copy of the official registration and financial information may be obtained from the state agency; CALIFORNIA - A copy of the official registration and financial information may be obtained from the state agency; COLORADO - A copy of the official registration and financial information may be obtained from the state agency; CONNECTICUT - A copy of the official registration and financial information may be obtained from the state agency; DELAWARE - A copy of the official registration and financial information may be obtained from the state agency; FLORIDA - A copy of the official registration and financial information may be obtained from the state agency; 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TTTREA

FUCHS
EXHIBIT 19

REDACTED

FUCHS
EXHIBIT 20

Miracle surgeries for children
**wonder
work**

"One or 100 that
will change the world."
—TIME

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Host of Jeopardy!

Bette Midler
Entertainer

Chris Meloni
Actor

Candice Bergen
Actor

Jane Kaczmarek
Actor

Sir Ben Kingsley
Actor



August XX, 2016

Dear SALUTATION,

It is 4:15pm, Thursday, June 30th - the final day of our 2016 fiscal year.

And my last chore is to write you this year-end thank you letter.

This year was our best year ever, and it would never have been possible without supporters like you. THANK YOU FOR HELPING US.

The past five years have had lots of ups and downs and more than a few surprises. At times, I wondered if maybe I was too old for another charity start-up. But today, as we pause to look back, I am so glad we stuck with it.

Today, in 44 of the poorest countries in the world, we have established 60 programs and partnerships.

Our partners range from small hospitals and clinics to large hospital networks and NGOs. Over the past 20 years of doing this work, we have learned that you can accomplish so much more when you partner with other like-minded people and organizations.

Over the past year, working with our partners - and with help from supporters like you - we helped provide 64,362 surgeries.

How many is that?

Imagine Gillette Stadium, where the New England Patriots play, with every seat filled with a smiling, happy patient. That's a lot of surgeries.

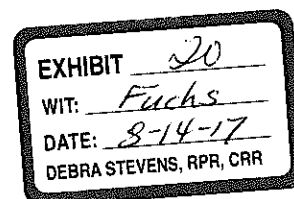
Calling them surgeries doesn't really do them justice.

They're actually modern-day, medical miracles that give crippled children the chance to walk and run. That re-build the faces of children who've been deformed by burns. And that give blind children and adults the chance to see again.

And they give folks like you and me, the very rare opportunity to save 64,362 children and adults no one else would help. Doesn't that feel good?

As a surgical charity, the number of surgeries we help provide every year is really our bottom line.

But it isn't all that we do.



"A surgery that can change a child's life is one of the best investments anyone can make." — Warren Buffett

4 - Philadelphia Suite 102 New York, NY 10001 T: 212.226.1644 wonderwork.org

We're working on a capital project to build a burn hospital in the poorest region of India. This 225-bed hospital will provide more than 15,000 surgeries a year for the poorest of the poor. We're searching for land right now and hope to break ground in the fall, and it will take 2 years to build. Rafael Vinoly, one of the most famous architects in the world, (and also a donor) has generously agreed to help design our new hospital pro bono.

We expanded our Board of Directors by 6 new members, including the best-selling author of *Freakonomics* and genius U. Chicago professor, Steve Levitt. Our Medical Advisory Board expanded as well, as we improve our governance and our leadership.

Our viral videos continue to raise vital awareness and funds. To date, 14+ million people have watched our videos and thousands have sent us donations from more than 85 countries.

We're working with The Harvard School of Public Health and Boston Consulting Group to build a cloud-based, electronic medical record database to house all of our patient records. This will help us guard against fraud while also helping improve our quality and effectiveness.

We're doing all of this with a tiny staff of 9 people (and two interns) working out of a very small office in New York City.

We're very proud that our overhead and admin expenses are extremely low. Even better, one of our Founding Donors pays for all of our non-program expenses so that 100% of all donations - including yours - can go towards programs.

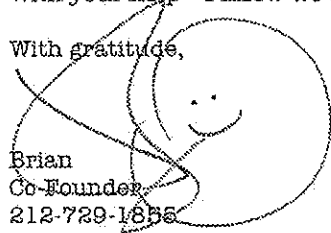
The last - and most important - thing I want you to know is how much we appreciate, and need, your support.

We're still a small charity that we started from scratch just five years ago. We get no money from the U.S. government or large grants from foundations or corporations. We depend entirely on donations from generous individuals like you.

I hope you stick with us because this next year we're going to need you more than ever. Our goal is to provide 130,000 surgeries - something no other surgical charity has ever done in one year.

With your help - I know we can do it. ☺

With gratitude,



Brian
Co-Founder
212-729-1856
brian@wonderwork.org

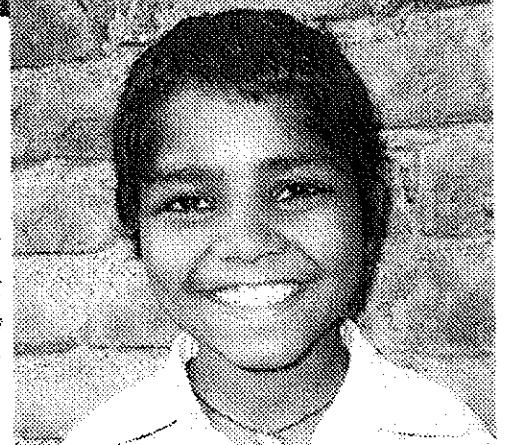
P.S. I am including an envelope so you can send us feedback on the following: Would you ever come to a dinner as our guest to hear about our programs and how we are using your donations? Would you ever want to travel to one of our partner hospitals in a developing country and meet some of the children whose lives you helped save? Are we mailing you too much? Do you have any ideas or suggestions for us? Do you know anyone else who might be able to help us? Any feedback greatly appreciated. THANK YOU!



FOR 20+ YEARS I'VE
TRAVELED TO MANY OF
THE POOREST COUNTRIES
IN THE WORLD.
I'VE WITNESSED
EXTREME POVERTY,
UNSPEAKABLE
SUFFERING, AND AMAZING
ACTS OF SELFLESSNESS
AND COMPASSION.
BUT THE MOST
POWERFUL THING I'VE
EVER SEEN... IS TO
WATCH A BLIND CHILD
OPEN THEIR EYES AND
SEE FOR THE VERY FIRST
TIME.

THE SURGERY THAT
RESTORES EYESIGHT
IS A TRUE MODERN-
DAY, MEDICAL
MIRACLE.
AND YOU HELP US
DELIVER THIS MIRACLE
TO HUNDREDS OF BLIND
CHILDREN AND ADULTS
EVERY SINGLE DAY.

THANK YOU,
BRIAN





THOUSANDS OF BLIND CHILDREN, WOMEN AND MEN SHOW UP AT OUR FREE SURGERY REGISTRATION CAMPS IN INDIA.



TWO SISTERS BOTH BORN BLIND



TWO MORE SISTERS BORN BLIND, SEE THEIR PARENTS IN BACKGROUND PLANTING RICE IN THEIR SMALL FIELD. THEY LIVE ON LESS THAN \$200/YR



THREE MOTHERS IN SHOCK AND GRIEF AFTER BEING TOLD NOTHING CAN BE DONE TO RESTORE THE EIGHTSIGHT OF THEIR CHILD. DEVASTATING! THE LITTLE GIRL IN THE MIDDLE DID UNDERGO SURGERY AND GOT SOME IMPROVEMENT. NOTHING COULD BE DONE FOR THE OTHER TWO CHILDREN.



THIS GIRL WAS PULLED FROM SCHOOL TO TAKE CARE OF HER GRANDMOTHER. AFTER SURGERY, SHE WILL GO BACK TO SCHOOL.



MINUTES AFTER OPENING HER EYES AND SEEING HER MOM FOR THE VERY FIRST TIME, THIS 7-YEAR-OLD EXPLORES HER MOTHER'S FACE.

THANK YOU, BRIAN



100% of all donations are used to fund our free surgery programs
thanks to one of our Founding Donors who pays all
administrative and fundraising expenses.

WONDER
WORK

411 Fifth Avenue, Suite 702
New York, NY 10016

Attn: Brian

Miracle surgeries for children
wonder
work
100% FREE SURGERY, SUPPLIES & POST
OPERATIVE CARE

100% of all donations
are used to fund our
free surgery programs thanks to
one of our founding Directors
who pays all administrative
and fundraising costs.

Callahan Smith



November 16, 2016

«FULLNAME»
«Entity»
«AD1» «AD2»
«CITY», «ST» «ZIP»

Dear «SALUTATION»,

I cannot tell you how much we appreciate the very generous donation you recently sent us. Thank you very much for helping us.

This is the busiest time of year for our partner hospitals and they all have huge backlogs and waiting lists. We're scrambling to raise as much as we can so that our partners don't have to turn anyone away.

It has been a really tough year for us for fundraising – your donation will really make a difference.

I want you to know also that we will use 100% of your donation for our free surgery programs. One of our founding donors is very generously paying for all our rent, admin and salaries, so your donation will be used for what matters to you and to us: life-changing surgeries.

I am getting ready for a big trip to Bangladesh. I'm excited because we are taking a sea plane up a river to some very rural villages that are so remote, they cannot be reached by roads. We're going to visit one of our partners who operates a floating hospital that helps the poor. It should be quite an experience. I will send you some pictures and some stories when I get back.

Until then, please know how much we appreciate – and need – your support.

We're a tiny charity with 9 employees that is working hard this year to provide free surgeries for 100,000 poor kids and adults who are crippled with clubfoot, severely burned or blind.

And we could never do it without your help!

THANK YOU,

Brian
Co-Founder

P.S. If you have any suggestions, ideas or feedback for me, please do not hesitate to contact me directly: brian@wonderwork.org or 212-729-1855.

This is your tax receipt for your donation of «TRANAMT» received on «TRANDATE». WonderWork is a 501(c)(3) charity. No goods or services were provided in return for this donation.

Miracle surgeries for children.

wonder
work

"A surgery that can change a child's life is one of the best investments anyone can make." —Warren Buffett
WonderWork Supporter

"...one of 10 ideas that will change the world."
—TIME

November 2, 2016

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Alex Trebek
Host of Jeopardy!

Bette Midler
Entertainer

Chris Meloni
Actor

Candice Bergen
Actor

Jane Kaczmarek
Actor

Sir Ben Kingsley
Actor



Dear Karen,

In spite of a really tough fundraising environment and all the challenges of running a small charity, we have a lot to be grateful for at WonderWork this Thanksgiving.

We're thankful that so far this year we've helped provide more than 68,000 surgeries for children and adults who could never afford them.

We're helping severely burned children rebuild their bodies and faces.

We're helping crippled children walk, stand and run for the first time.

We're helping restore the eyesight of tens of thousands of blind children and adults.

Most of them had waited many years for surgery.

We're thankful for our 61 partners which includes local hospitals and clinics in many of the poorest countries in the world.

From slums in India to refugee camps in Africa to rural villages in Nepal, hundreds of our partner surgeons, nurses and anesthesiologists are working 7 days a week operating on the poorest of the poor.



100% of all donations goes towards our free surgery programs.
A founding donor pays all admin and fundraising expenses.

411 Fifth Avenue, Suite 702, New York, NY 10016 T. 212.729.1955 WonderWork.org

*This is DeLois in the Philippines
in 1986 on her very first surgical
mission. Since then, she has helped
provide more than 1 million surgeries.*

We're thankful for the more than 200,000 donors and supporters who helped us get this charity started five years ago and continue to help us every day.

Without our donors and supporters, we could help no one.

We're very grateful for our small, but very talented and experienced staff. Believe it or not, we have just 9 employees.

DeLois Greenwood, our Chief Program Officer, has been helping provide surgeries for poor children since 1986.

I have never worked with a team that cared as much, worked as hard or got as much done day in and day out.

We're grateful for our Founding Donor who is paying all of our overhead, salaries and fundraising expenses so 100% of our donations can be used for our free surgery programs.

Finally, we are very thankful for *your* help and support.

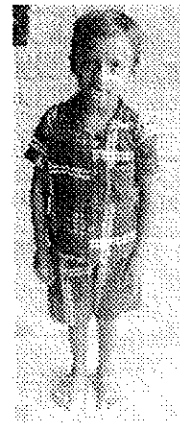
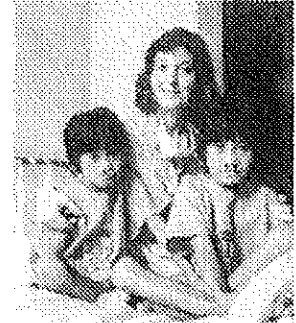
I realize that you probably support a lot of very worthy causes.

But please know that none of them appreciate your support more than we do!

Happy Thanksgiving.

Brian
Co-Founder
212-729-1855
brian@wonderwork.org

P.S. I am including an envelope for any feedback, ideas, suggestions you might have for us! We would love to hear from you.



*I am preparing for a trip to
rural Bangladesh to visit a
floating hospital boat that goes
to very poor villages that can't
be reached by car. I will send
you some photos and stories. Until
then, thank you so much for
helping us.*



Miracle surgery for children
wonder
work
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New York, NY 10016

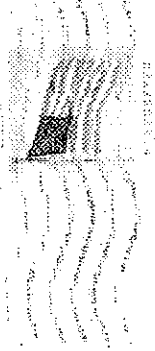
100% of all donations goes
towards our free surgery programs.
A founding donor pays all admin
and fundraising expenses.

Karen Lazarus
WonderWork
411 5th Ave
Ste 702
New York, NY 10016

10016-2237

10016-2237

wonder
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411 Fifth Avenue, Suite 702
New York, NY 10016
Attn: Brian



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